

SAN FRANCISCO PUBLIC LIBRARY



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San Francisco Public Library

GOVERNMENT INFORMATION CENTER
SAN FRANCISCO PUBLIC LIBRARY

REFERENCE BOOK


Not to be taken from the Library

300V-15447

SAN FRANCISCO PUBLIC LIBRARY

APPLICATIONS FOR USE OF MEETING ROOMS

Applications are inserted according to the date of requested use of a meeting room. If the request is for a series of dates, the application is inserted according to the date of first use.



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<https://archive.org/details/requestforuseofp1994sanf>

75
31a
26-94

SF Public Library

EXPIRATION DATE: June 30 94

APPLICATION FOR USE OF SFPL MEETING ROOM:

1-26-94

Note: Complete form 74.3 in duplicate)
and submit to Manager of Requested Facility

| | | |
|----------------------------------------------------------------------|--|-------------------------------|
| DATES REQUESTED: 1993 1st & LAST Tues in Month | | TIME REQUESTED: 7:00-10:00 pm |
| FACILITY: UPSTAIRS MEETING POTrero HILL LIBRARY; ROOM | | ATTENDANCE EXPECTED: 30-50 |
| Describe event or purpose of meeting: NEIGHBORHOOD ASSOC. MEETING | | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|---------------------------------------------------------------------|---------------------------------|------------------------------------------------------------------------------------|
| NAME OF GROUP: POTrero BOOSTERS & MERCHANTS ASSOC | | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| PURPOSE OF GROUP: NEIGHBORHOOD IMPROVEMENT, PLANNING, PROTECTION | | |
| PERSON APPLYING: RICHARD C. MILLET | POSITION IN GROUP: PRESIDENT | |
| MAILING ADDRESS: 1459-18th STREET #133 San Francisco, CA 94107 | | |
| DAY PHONE: 861-0345 | NIGHT PHONE: 861-0345 | |

CATEGORY OF USE: circle all that apply

| | | |
|---------------------------------------------|-----|----|
| Library-sponsored event: | Yes | No |
| Government agency: | Yes | No |
| Community-based group: (NEIGHBORHOOD ASSOC) | Yes | No |
| Children/Youth Literacy/Education Group: | Yes | No |
| Other: | | |

CONDITIONS FOR USE:

Insurance required (Yes/No). If yes, attach insurance rider.

I certify I have read the meeting room rules, Indemnification, and waiver of liability and agree to all provision of the above:

Richard C. Millet (signature)

SPECIAL AUTHORIZATION:

| | | |
|-------------------|-------|-----------------------------------|
| REFRESHMENTS: | _____ | initials of authorizing authority |
| FEES PAID/WAIVED: | _____ | |
| Room rental: | _____ | rec'd/waived by: _____ |
| Key Deposit: | _____ | rec'd/waived by: _____ |
| Janitorial: | _____ | rec'd/waived by: _____ |

APPROVED _____ DISAPPROVED _____

ROOM NOT AVAILABLE: ALTERNATE SUGGESTED: _____

by: Branch/Main Manager: _____

DOCUMENTS DEPT.

JAN 27 1994

SAN FRANCISCO
PUBLIC LIBRARY

NOV 1 1993

EXPIRATION DATE:

APPLICATION FOR USE OF SFPL MEETING ROOM:

Note: Complete form 74.3 in duplicate)
and submit to Manager of Requested Facility

| | |
|---------------------------------------------------------------------------------------------------------------|----------------------------------------|
| DATES REQUESTED: Sun. 5/19/94 and 1/12/94 | TIME REQUESTED: 5 to 6:30 PM |
| FACILITY: water addition community room | ATTENDANCE EXPECTED: 15 |
| Describe event or purpose of meeting: Poetry gathering to encourage people to write and read poetry | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------|--------------------------------------------------------------------------|
| NAME OF GROUP: Live Poets Society | Non-Profit: Yes <input type="radio"/> No <input type="radio"/> |
| PURPOSE OF GROUP: Sharing of poetry | |
| PERSON APPLYING: Sally Saunders | POSITION IN GROUP: |
| MAILING ADDRESS: 2030 Vallejo St SF CA 94123 Apt 501 | |
| DAY PHONE: 415 673 7213 | NIGHT PHONE: |

CATEGORY OF USE: circle all that apply

| | | |
|------------------------------------------|-----|----|
| Library-sponsored event: | Yes | No |
| Government agency: | Yes | No |
| Community-based group: | Yes | No |
| Children/Youth Literacy/Education Group: | Yes | No |
| Other: | | |

Individual for anyone interested

CONDITIONS FOR USE:

Insurance required (Yes/No). If yes, attach insurance rider.

I certify I have read the meeting room rules, Indemnification, and Waiver of Liability and agree to all provision of the above:

Sally Saunders (signature)

SPECIAL AUTHORIZATION:

| | | |
|-------------------|-------|-----------------------------------|
| REFRESHMENTS: | _____ | initials of authorizing authority |
| FEES PAID/WAIVED: | | |
| Room rental: | _____ | rec'd/waived by: _____ |
| Key Deposit: | _____ | rec'd/waived by: _____ |
| Janitorial: | _____ | rec'd/waived by: _____ |

☒ APPROVED

_____ DISAPPROVED

_____ ROOM NOT AVAILABLE: ALTERNATE SUGGESTED: _____

by: Branch/Main Manager: _____

Joan Jackson

DOCUMENTS DEPT

NOV 10 1993

SAN FRANCISCO
PUBLIC LIBRARY

16/94
SF
P75
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1/6/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/06/94

BUSINESS-SCIENCE
DOCUMENTS DEPT.

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JAN 7 1994

Bernal Heights Branch

SAN FRANCISCO
PUBLIC LIBRARY

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

SF Friends of Urban Forest - Doug Hogin
401 Nevada St, San Francisco, CA 94110; TEL. D 550-4777/E 648-6292
Wed 1/19/94: 7:30-8:45PM
Expiration date: 01/20/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. W 255-3719/H 752-6190
Sat 1/8 & 2/12/94: 12:00-4:00PM
Expiration date: 02/13/94

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94

San Francisco Amateur Astronomers - Barry Hirrell
511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759
4th Wednesdays: 6:00-8:45PM
Expiration date: 04/30/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/06/94

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Park Branch

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94 & 2/16/94: 6:00-10:00PM
Expiration date: 02/17/94

Haight-Ashbury Improvement Association - Ed Spivak
953 Haight St, San Francisco, CA 94117; TEL. 861-5182
10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM
Expiration date: 03/25/94

Haight-Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 02/11/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn/Stanyan-W, S. F., CA 94117; TEL. D 553-1061/E 753-7292
Thurs 11/4/93 & 2/3/94: 7:00-9:00PM
Expiration date: 02/04/94

SF/SPCA C.A.T. - Leslie Wilson
2500 - 16th St, San Francisco, CA 94103; TEL. D 554-3097/E 661-5553
3rd Tuesdays: 6:30-9:00PM
Expiration date: 04/20/94

San Francisco Support Group for Adults with Dyslex - William Reed
1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00-3:00PM
Expiration date: 03/31/94

Potrero Youth Court - Officer Terrye Ivy
2300 Third St., San Francisco, CA 94107; TEL. 255-6297
Wed 9/15, 10/20, 11/17, 12/15/93 & 1/19/94: 3:45-5:45PM
Expiration date: 01/20/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/06/94

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Presidio Branch

Post-polio Support Group - Nancy P. Norris
405 Davis Court #1007, San Francisco, CA 94111; TEL. 788-2115
Biweekly Thursdays, Aug. 1993 to Feb. 1994: 3:00-5:00PM
Expiration date: 02/25/94

Western Addition Branch

American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
Expiration date: 03/31/94

Live Poets Society - Sally Saunders
2030 Vallejo St, Apt 501, San Francisco, CA 94123; TEL. 673-7213
Wed 1/5 & 1/12/94: 5:00-6:30PM
Expiration date: 01/13/94

National Council of Negro Women - Willie B. Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
Sat 9/18, 10/16, 11/20, 12/18/93, 1/15 & 2/19/94: 2:00-5:00PM
Expiration date: 02/20/94

San Francisco Esperanto Regional Organization - Charles E. Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
1st Saturdays 9/4/93 - 2/5/94: 1:00-4:00PM
Expiration date: 02/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94

10 EXCELSIOR BRANCH
SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: INTERNATIONAL TRAINING IN COMMUNICATION

PURPOSE OF ORGANIZATION: TO DEVELOP SPEAKING AND COMMUNICATION SKILLS

TYPE OF ACTIVITIES taking place in the Library: MONTHLY MEETINGS

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: DAVID GORE

ADDRESS: 875-25TH AVE., SF 94121

TELEPHONE: W: 415-255-3719 H: 752-6190

OFFICIAL CAPACITY: CLUB PRESIDENT

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: SHARON KELLY

Telephone: 415-399-5848

NAME: GEORGIA YOUNG

Telephone: 415-333-4954

SPACE REQUESTED: MEETING ROOM

DATE(S): 1-8-94, 2-12-94

Hours: NOON to 4 P.M.

APPROXIMATE ATTENDANCE: AT LEAST SIX

OTHER INFORMATION: _____

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT.

NOV 13 1993

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 27 1994

(Adopted 9/15/92)

Expiration Date: 7/15/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------|-----------------------------------|
| Dates Requested: <u>2nd Thursday</u> | Time Requested: <u>7:00 pm</u> |
| Facility: PARK | Attendance Expected: <u>15-40</u> |
| Describe event or purpose of meeting: <u>Monthly general meeting of neighborhood group.</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>HAIGHT ASHBURY NEIGHBORHOOD COUNCIL</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Neighborhood association; monthly discussions</u> | |
| Primary Contact Person: <u>Donna Grouse</u> | Position in Group: <u>Recording Secretary</u> |
| Full Mailing Address: <u>409 Clayton St. SF 94117</u> | |
| Day Phone: <u>621-9553</u> | Evening Phone: <u>564-8757</u> |
| Secondary Contact Person: <u>Carmen White</u> | Position in Group: <u>President</u> |
| Full Mailing Address: <u>545 Ashbury #2 SF 94117</u> | |
| Day Phone: <u>705-1837</u> | Evening Phone: <u>255-4757</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

HANC (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the HANC (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on HANC (group or organization), its agents or employee.

HANC (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Donna Grouse (signature) 1/20/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S O're

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JAN 6 1994

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR SHORT-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)

JAN 10 1994

LOCATION OF MEETING ROOM: Bernal Heights SAN FRANCISCO

DATE(S): Wed. 1/12/94 HOURS: 6:30pm to 8:30pm PUBLIC LIBRARY

NAME OF ORGANIZATION: Girl Scout Troops 207, 582, 1759

PURPOSE OF ORGANIZATION: youth education

TYPE OF ACTIVITIES planned for library space: parent meeting

ESTIMATED ATTENDANCE: 10-25

INDIVIDUAL IN CHARGE of meeting(s) in library space:

NAME: Nancy O'Brien

OFFICIAL CAPACITY: Troop Leader

TELEPHONE NO.: Pager 1-800-759-7243 PIN 126-3562

ADDRESS: 7 Putnam St

San Francisco CA 94110

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Nancy L. Berry TELEPHONE NO.: 586-7083

NAME: Sandra Bowman TELEPHONE NO.: 824-1149

OTHER INFORMATION: Have used room for this purpose before

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: Nancy O'Brien *Nancy O'Brien*

OFFICIAL CAPACITY: Troop Leader

TELEPHONE NO.: 415-824-6278

ADDRESS: 7 Putnam St

San Francisco CA 94110

TODAY'S DATE: 1-5-94

Request for Use of Public Meeting Rooms

EXP: 6/44

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: CWEST - COMMODORE USER GROUP

PURPOSE OF ORGANIZATION: COMPUTER USER GROUP SUPPORTING THE COMMODORE 64/128
& OTHER TYPES OF COMPUTERS

TYPE OF ACTIVITIES taking place in the Library: DEMONSTRATIONS OF COMPUTER
SOFTWARE AND HARDWARE AND DISCUSSIONS AND QUESTIONS & ANSWERS

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: GEORGE TODDADDRESS: 3462 17TH STREET, APT. B, SAN FRAN., CA 94110TELEPHONE: 415-626-9946OFFICIAL CAPACITY: SECRETARY/TREASURER

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: GEORGE TODDTelephone: WK: 771-0273, HW: 626-9946NAME: GAY NELL PARKSTelephone: 543-7609SPACE REQUESTED: MEETING ROOMDATE(S): JAN 12, FEB 9, MAR 9, APR 13, MAY 11, JUNE 8 Hours: 6:30 to 8:45APPROXIMATE ATTENDANCE: 15-30

OTHER INFORMATION: _____

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the branch where
space is requested.

For further information call:
558-3602



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 27 1994
(Adopted 9/15/92)

Expiration Date: 7/22/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------------------------|--------------------------------|
| Date Requested: <u>3rd Thursday</u> | Time Requested: <u>1:00 pm</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>15</u> |
| Describe event or purpose of meeting: <u>Monthly meeting of coalition of service providers</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>HAIGHT ASHBURY SERVICE ASSOCIATION</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Discussion - regular meeting of group.</u> | |
| Primary Contact Person: <u>Donna Gause</u> | Position in Group: <u>organizer</u> |
| Full Mailing Address: <u>409 Clayton St. S.F. 94117</u> | |
| Day Phone: <u>621-9553</u> | Evening Phone: <u>564-8757</u> |
| Secondary Contact Person: <u>Anthony Van der Muhl</u> | Position in Group: <u>organizer</u> |
| Full Mailing Address: <u>409 Clayton St. SF 94117</u> | |
| Day Phone: <u>621-9553</u> | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Haight Ashbury Service Assoc. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the HASA (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on HASA (group or organization), its agents or employee.

HASA (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Donna Gause (signature) 1/20/94 (date).

SPECIAL AUTHORIZATION:
REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED:

| | |
|-----------------------|------------------------|
| Room rental: \$ _____ | rec'd/waived by: _____ |
| Key Deposit: \$ _____ | rec'd/waived by: _____ |
| Janitorial: \$ _____ | rec'd/waived by: _____ |

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Doe

BERNAL HEIGHTS BRANCH

Wants. Jan. 19 730-8:45
SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR LONG-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)

DEC 30 1993

31a
-3093 LOCATION OF MEETING: _____

DOCUMENTS DEPT.

MONTHS: 11 through _____

JAN 3 1994

DAY(S) OF THE WEEK/HOURS OF THE DAY: _____

SAN FRANCISCO
PUBLIC LIBRARY

NAME OF ORGANIZATION: SF Friends of Urban Forest

PURPOSE OF ORGANIZATION: tree planting in Bernal Heights

TYPE OF ACTIVITIES planned for library space: meeting

ESTIMATED ATTENDANCE: 40

INDIVIDUAL IN CHARGE of meetings in library space:

NAME: Doug Hogin

OFFICIAL CAPACITY: volunteer

TELEPHONE NO.: 648 6292 (DAY 550-4777)

ADDRESS: 401 Nevada St

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Mel Johnson

TELEPHONE NO.: 543 5000

NAME: _____

TELEPHONE NO.: _____

OTHER INFORMATION: _____

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: Doug Hogin

OFFICIAL CAPACITY: see above

TELEPHONE NO.: _____

ADDRESS: _____

TODAY'S DATE: _____

SF
P75
#31
-25-94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/25/94

DOCUMENTS DEPT. Page 1

JAN 26 1994

SAN FRANCISCO
PUBLIC LIBRARY

Bayview Branch

O.M.I. - Larry Chew

446 Randolph St, San Francisco, CA 94132; TEL. 584-8188

Fri 1/28/94: 3:30-5:30PM

Expiration date: 01/29/94

Urban Economic Development Corp. - Matthew Thomas

1426 Fillmore St #205, San Francisco, CA 94115; TEL. D 923-0105/E 777-9

Wed 2/23/94: 6:30PM

Expiration date: 02/24/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill

3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035

Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM

Expiration date: 06/18/94

Prentiss Neighborhood Group - Mary Butterwick

328 Prentiss, San Francisco, CA 94110; TEL. W 744-1985/H 282-1380

Wed 2/9 or 2/16/94: 7:00-8:30PM

Expiration date: 02/17/94

Excelsior Branch

CWest - Commodore User Group - George Todd

3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946

Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM

Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen

4477 Mission St, San Francisco, CA 94112; TEL. 587-1231

4th Wednesdays: 6:30-8:30PM

Expiration date: 06/23/94

International Training in Communication - David Gore

875 - 25th Ave, San Francisco, CA 94121; TEL. W 255-3719/H 752-6190

Sat 1/8 & 2/12/94: 12:00-4:00PM

Expiration date: 02/13/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/25/94

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Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell
511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759
4th Wednesdays: 6:00-8:45PM
Expiration date: 04/30/94

Park Branch

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94 & 2/16/94: 6:00-10:00PM
Expiration date: 02/17/94

Fiction Writing Workshop - Ralph Howard
2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898
Tues 1/25/94: 7:00-9:00PM
Expiration date: 01/26/94

Green Party County Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Mondays: 7:00PM
Expiration date: 03/15/94

Haight-Ashbury Improvement Association - Ed Spivak
953 Haight St, San Francisco, CA 94117; TEL. 861-5182
10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM
Expiration date: 03/25/94

Haight-Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 02/11/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/25/94

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Park Branch

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn/Stanyan-W, S. F., CA 94117; TEL. D 553-1061/E 753-7292
Thurs 11/4/93 & 2/3/94: 7:00-9:00PM
Expiration date: 02/04/94

RAD - Joe Konopka
544 Ashbury St, San Francisco, CA 94117; TEL. D 338-2764/E 861-0256
Mon 2/28/94: 7:00-9:00PM
Expiration date: 03/01/94

San Francisco Support Group for Adults with Dyslex - William Reed
1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00-3:00PM
Expiration date: 03/31/94

Presidio Branch

Post-polio Support Group - Nancy P. Norris
405 Davis Court #1007, San Francisco, CA 94111; TEL. 788-2115
Biweekly Thursdays, Aug. 1993 to Feb. 1994: 3:00-5:00PM
Expiration date: 02/25/94

Western Addition Branch

American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
Expiration date: 03/31/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/25/94

Page 4

Western Addition Branch

National Council of Negro Women - Willie B. Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
Sat 9/18, 10/16, 11/20, 12/18/93, 1/15 & 2/19/94: 2:00-5:00PM
Expiration date: 02/20/94

San Francisco Esperanto Regional Organization - Charles E. Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
1st Saturdays 9/4/93 - 2/5/94: 1:00-4:00PM
Expiration date: 02/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94

JAN 27 1994

10/70

SAN FRANCISCO PUBLIC LIBRARY

Request for Use of Public Meeting Rooms

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: Bernal Library CommitteePURPOSE OF ORGANIZATION: Increase of library usage, community awareness of library servicesTYPE OF ACTIVITIES taking place in the Library: Brainstorming meeting - Meeting Librarians

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: Ellen EgbertADDRESS: 303 DivanaTELEPHONE: 824-8985OFFICIAL CAPACITY: Committee member

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: Ron Morgan Telephone: _____NAME: Lisa Kiburica Telephone: _____SPACE REQUESTED: meeting roomDATE(S): 1/26 Hours: 7 to 8.30APPROXIMATE ATTENDANCE: 15

OTHER INFORMATION: _____

This form is to be completed and returned to:Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the branch where
space is requested.For further information call:
558-3602

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28-94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/28/94

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JAN 31 1994

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SAN FRANCISCO
PUBLIC LIBRARY

Bayview Branch

O.M.I. - Larry Chew

446 Randolph St, San Francisco, CA 94132; TEL. 584-8188

Fri 1/28/94: 3:30-5:30PM

Expiration date: 01/29/94

Urban Economic Development Corp. - Matthew Thomas

1426 Fillmore St #205, San Francisco, CA 94115; TEL. D 923-0105/E 777-9

Wed 2/23/94: 6:30PM

Expiration date: 02/24/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill

3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035

Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM

Expiration date: 06/18/94

Prentiss Neighborhood Group - Mary Butterwick

328 Prentiss, San Francisco, CA 94110; TEL. W 744-1985/H 282-1380

Wed 2/9 or 2/16/94: 7:00-8:30PM

Expiration date: 02/17/94

Excelsior Branch

CWest - Commodore User Group - George Todd

3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946

Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM

Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen

4477 Mission St, San Francisco, CA 94112; TEL. 587-1231

4th Wednesdays: 6:30-8:30PM

Expiration date: 06/23/94

International Training in Communication - David Gore

875 - 25th Ave, San Francisco, CA 94121; TEL. W 255-3719/H 752-6190

Sat 1/8 & 2/12/94: 12:00-4:00PM

Expiration date: 02/13/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/28/94

Page 2

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell
511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759
4th Wednesdays: 6:00-8:45PM
Expiration date: 04/30/94

Park Branch

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94 & 2/16/94: 6:00-10:00PM
Expiration date: 02/17/94

Fiction Writing Workshop - Ralph Howard
2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898
1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM
Expiration date: 04/26/94

Green Party County Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Mondays: 7:00PM
Expiration date: 03/15/94

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
3rd Thursdays: 1:00PM
Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/28/94

Page 3

Park Branch

Haight-Ashbury Improvement Association - Ed Spivak
953 Haight St, San Francisco, CA 94117; TEL. 861-5182
10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM
Expiration date: 03/25/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn/Stanyan-W, S. F., CA 94117; TEL. D 553-1061/E 753-7292
Thurs 11/4/93 & 2/3/94: 7:00-9:00PM
Expiration date: 02/04/94

RAD - Joe Konopka
544 Ashbury St, San Francisco, CA 94117; TEL. D 338-2764/E 861-0256
Mon 2/28/94: 7:00-9:00PM
Expiration date: 03/01/94

San Francisco Support Group for Adults with Dyslex - William Reed
1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00-3:00PM
Expiration date: 03/31/94

Presidio Branch

Post-polio Support Group - Nancy P. Norris
405 Davis Court #1007, San Francisco, CA 94111; TEL. 788-2115
Biweekly Thursdays, Aug. 1993 to Feb. 1994: 3:00-5:00PM
Expiration date: 02/25/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

01/28/94

Page 4

Western Addition Branch

American Chronic Pain Association - Janet Raiche

154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353

10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM

Expiration date: 03/31/94

National Council of Negro Women - Willie B. Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734

Sat 9/18, 10/16, 11/20, 12/18/93, 1/15 & 2/19/94: 2:00-5:00PM

Expiration date: 02/20/94

San Francisco Esperanto Regional Organization - Charles E. Galvin, Jr.

121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783

1st Saturdays 9/4/93 - 2/5/94: 1:00-4:00PM

Expiration date: 02/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery

111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975

3rd Tuesdays: 1:00-2:30PM

Expiration date: 03/31/94

**SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS**

JAN 21 1994
(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------|-------------------------------------|
| Dates Requested: <u>JANUARY, 28, 1994.</u> | Time Requested: <u>3:30 - 5:30</u> |
| Facility: <u>BAYVIEW- WADEN #13</u> | Attendance Expected: <u>35 - 40</u> |
| Describe event or purpose of meeting: <u>ORIENTATION TO INTRODUCE CLIENTS TO FIRE DEPT.</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>O.M.I.</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>TO INTRODUCE POTENTIAL CLIENTS TO FIRE DEPT...</u> | |
| Primary Contact Person: <u>LARRY CHEW</u> | Position in Group: <u>EXECUTIVE DIRECTOR</u> |
| Full Mailing Address: <u>446 RANDOLPH ST.</u> <u>94132</u> | |
| Day Phone: <u>(415) 524-2128</u> | Evening Phone: _____ |
| Secondary Contact Person: <u>DARLENE FRANKLIN</u> | Position in Group: _____ |
| Full Mailing Address: <u>446 RANDOLPH ST.</u> | |
| Day Phone: <u>(415) 524-2128</u> | Evening Phone: <u>(415) 822-4247</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

O.M.I. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the O.M.I. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on O.M.I. (group or organization), its agents or employee.

O.M.I. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Larry O. Chew (signature) 1/20/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
Key Deposit: \$ _____ rec'd/waived by: _____
Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

DOCUMENTS DEPT.

JAN 26 1994



**THE
SAN FRANCISCO FIRE DEPARTMENT**



**INVITES YOU TO ATTEND AN ORIENTATION
FOR THE 1994 RECRUITMENT**

**THE SAN FRANCISCO FIRE DEPARTMENT IS COMMITTED TO ITS
GOAL TO HAVE OUR WORKFORCE REFLECT THE WONDERFUL DIVERSITY
OF THE CITY OF SAN FRANCISCO. OUR RECRUITMENT EFFORTS ARE THE
KEY TO OUR CONTINUED SUCCESS AND WE SOLICIT YOUR SUPPORT.**

SITES CHOSEN FOR ORIENTATIONS ARE THE FOLLOWING:

**CHINATOWN Y.W.C.A.
965 CLAY STREET
MON. 6:30pm-8:30pm
JAN. 10, 24, 31**

**O.M.I.
466 RANDOLPH ST.
TUES. 6:30pm-8:30pm
JAN. 11, 18, 25**

**SOUTH OF MARKET
EMPLOYMENT CENTER
965 MISSION ST.
WED. 6:30pm-8:30pm
JAN. 12, 19, 26**

**ELLA HILL HUTCH
COMMUNITY CENTER
1050 McALLISTER ST.
THURS. 6:30pm-8:30pm
JAN. 13, 20, 27**

**EXPLORE THE EXCITING AND REWARDING CAREER OPPORTUNITIES
NOW AVAILABLE WITH THE SAN FRANCISCO FIRE DEPARTMENT**

**SAN FRANCISCO FIRE DEPARTMENT
RECRUITMENT OFFICE
1152 OAK STREET AT DIVISADERO
552-5432**

BRING A FRIEND!!!!



EMPLOYMENT OPPORTUNITY WITH THE CITY AND COUNTY OF
SAN FRANCISCO

H-2 FIREFIGHTER (ENTRY LEVEL)

CURRENT ANNUAL BASE SALARY (as of December, 1993)

| | |
|-------------|----------|
| First Year | \$41,864 |
| Second Year | \$43,952 |
| Third Year | \$46,145 |
| Fourth Year | \$48,468 |

DUTIES: Responds to fires and other emergencies, including medical crises and auto accidents, maintains Department equipment, and routinely inspects businesses, schools, and homes to ensure fire safety.

AVAILABILITY OF APPLICATIONS: The job announcement is expected to be issued in early 1994, with a two day application filing period in February, 1994. Applicants who fulfill the minimum qualifications will be tested approximately two months after the application filing date.

EXAM PROCESS: To be eligible for hire, candidates must achieve a qualifying score on a Written and Oral Comprehension Test and pass a Physical Ability Test and a background investigation. Candidates must also pass a medical examination before appointment.

MINIMUM QUALIFICATIONS:

- At least 18 years of age (no maximum)
- No citizenship required, but must be eligible to work in the U.S.
- CA driver's license with good driving record (at appointment)
- High school diploma or equivalent
- San Francisco resident for at least four months prior to the final date of application and through the hire date
- Good physical health

(** Please note: These are the minimum qualifications established for the most recent administration of the H-2 Firefighter examination and are subject to change.)

BENEFITS:

- Two week paid vacation after one year
- Choice of several health plans, with family and dental coverage available
- Comprehensive retirement plan
- All uniforms, equipment, and training provided

FOR MORE INFORMATION: Call the SFFD Recruitment Unit at 552-5342.

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

FEB 10 1994

Expiration Date:

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------------------------------|--------------------------------|
| Dates Requested: Jan. 31, Feb. 9, March 2 March 21, March 28, April 18, April 25 | Time Requested: 8:00pm-10:00pm |
| Facility: PARK please add | Attendance Expected: 8 people |
| Describe event or purpose of meeting: Fiction writing workshop, Feb. 16 and 23. Thanks! | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Name of Group: Fiction Writing Workshop | Non-Profit: Yes <input type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Fiction workshop for serious writers, self-run, emphasis on the novel. | |
| Primary Contact Person: Ralph R. Howard | Position in Group: Co-leader |
| Full Mailing Address: Law Office of Ralph Howard, 2824 Geary #1, SF, 94118 | |
| Day Phone: 929-1898 | Evening Phone: same |
| Secondary Contact Person: Keiko Kawano | Position in Group: Co-leader |
| Full Mailing Address: 2824 Geary, #1, S.F. 94118 | |
| Day Phone: 788-1113 | Evening Phone: 929-1898 |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Fiction Workshop (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Fiction Workshop (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Fiction Workshop (group or organization), its agents or employee.

Fiction Workshop (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Ralph Howard (signature) 1/25/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ rec'd/waived by:

Key Deposit: \$ rec'd/waived by:

Janitorial: \$ rec'd/waived by:

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested:BY: BRANCH/MAIN MANAGER: Ruth S. Wase

DOCUMENTS DEPT

FEB 16 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 24 1994
 (Adopted 9/15/92)

Expiration Date: 8/15/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|----------------------------------------------------------------------------|----------------------------------------------|
| Dates Requested: <u>Tuesdays Beginning 2/1/94</u> | Time Requested: <u>2:00 P.M. - 4 P.M.</u> |
| Facility: <u>BRUNNEN-WADEN 1923 Noe Valley</u> | Attendance Expected: <u>6-12</u> |
| Describe event or purpose of meeting: <u>Reading of Plays out loud.</u> | |

DOCUMENTS DEPT.
 JAN 25 1994
 SAN FRANCISCO
 PUBLIC LIBRARY

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: <u>Playreading</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>To give people a chance to experience plays they ordinarily wouldn't read.</u> | |
| Primary Contact Person: <u>Saul Fenster</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>520 Day St., San Francisco, Ca. 94131</u> | |
| Day Phone: <u>(415) 647-2483</u> | Evening Phone: <u>Same</u> |
| Secondary Contact Person: <u>Not yet decided.</u> | Position in Group: |
| Full Mailing Address: | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Playreaders (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Noe Valley Library (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Noe Valley Library (group or organization), its agents or employee.

Playreaders (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Saul Fenster (signature) 1/20/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: None (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ rec'd/waived by:
 Key Deposit: \$ rec'd/waived by:
 Janitorial: \$ rec'd/waived by:

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested:

BY: BRANCH/MAIN MANAGER: Rolanda Guefuer

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3/2
8-94
JAN 18 1994

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR LONG-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)LOCATION OF MEETING: Bernal Branch LibraryMONTHS: February 9¹⁶ through DAY(S) OF THE WEEK/HOURS OF THE DAY: Wednesday 7-8:30pmNAME OF ORGANIZATION: ~~Bernal~~ Prentiss ~~Block Group~~ ^{Neighborhood} GroupPURPOSE OF ORGANIZATION: Become acquainted with our neighbors and
work together toward a safer neighborhoodTYPE OF ACTIVITIES planned for library space: Discussions & lectures
(i.e. SAFE Program)ESTIMATED ATTENDANCE: 15-20 ?

INDIVIDUAL IN CHARGE of meetings in library space:

NAME: Mary ButterwickOFFICIAL CAPACITY: organizerTELEPHONE NO.: 444 1985 (work) 282 1380 (home)ADDRESS: 328 Prentiss, SF CA 94110TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact,
if necessary:NAME: Tom Daniel TELEPHONE NO.: 790 7191 (work)NAME: Becky Sharp TELEPHONE NO.: OTHER INFORMATION: DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San
Francisco Public Library Meeting Room Policy, and to be responsible for
any cost or liability arising from our use of this facility.NAME: Mary ButterwickOFFICIAL CAPACITY: organizerTELEPHONE NO.: same as aboveADDRESS: same as above

DOCUMENTS DEPT.

JAN 26 1994

SAN FRANCISCO
PUBLIC LIBRARYTODAY'S DATE: 1/8/93

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

Expiration Date: April 1, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Dates Requested: February 16, 1994 (Wednesday) | Time Requested: 6:00 p.m. to 10:00 p.m. |
| Facility: Park Branch Community Room | Attendance Expected: 40 - 60 people |
| Describe event or purpose of meeting: Discussion of community issues, usually with guest speakers. | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------|
| Name of Group: Cole Valley Improvement Association | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Discussions of community issues | | |
| Primary Contact Person: Karen Crommie | | Position in Group: President |
| Full Mailing Address: 628 Ashbury St., S.F. 94117 | | |
| Day Phone: (415) 431-1414 | Evening Phone: (415) 431-1414 | |
| Secondary Contact Person: Doerte Murray | | Position in Group: Treasurer |
| Full Mailing Address: 526 Clayton St., S.F., 94117 | | |
| Day Phone: 626-3607 | Evening Phone: 626-3607 | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Cole Valley Improvement Assn. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Cole Valley Imp. Assn. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Cole Valley Imp. Assn. (group or organization), its agents or employee.

Cole Valley Imp. Assn. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Karen Lynn Crommie (signature) Nov. 1, 1993 (date).

SPECIAL AUTHORIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| REFRESHMENTS: _____ (initials of authorizing authority). | DOCUMENTS DEPT. |
| FEES PAID/WAIVED: | |
| Room rental: \$ _____ | rec'd/waived by: _____ |
| Key Deposit: \$ _____ | rec'd/waived by: <u>LDV</u> |
| Janitorial: \$ _____ | rec'd/waived by: _____ |
| <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Room Not Available: Alternate Suggested: _____ | |
| BY: BRANCH/MAIN MANAGER: <u>Ruth S. Vos</u> | |



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/18/94

Page 1

Bayview Branch

Urban Economic Development Corp. - Matthew Thomas
1426 Fillmore St #205, San Francisco, CA 94115; TEL. D 923-0105/E 777-9
Wed 2/23/94: 6:30PM
Expiration date: 02/24/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/18/94

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Noe Valley Branch

San Francisco Amateur Astronomers - Barry Hirrell
511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759
4th Wednesdays: 6:00-8:45PM
Expiration date: 04/30/94

Park Branch

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM
Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard
2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898
Wed 2/16 & 2/23/94: 8:00-10:00PM
Expiration date: 02/24/94

Fiction Writing Workshop - Ralph Howard
2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898
1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM
Expiration date: 04/26/94

Green Party County Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Mondays: 7:00PM
Expiration date: 03/15/94

Haight Ashbury Merchant - Judy Gilman
1408 Haight St, San Francisco, CA 94117; TEL. D 863-2837/E 863-3148
Tues 2/22/94: 7:00PM
Expiration date: 02/23/94

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
3rd Thursdays: 1:00PM
Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/18/94

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Park Branch

Haight-Ashbury Improvement Association - Ed Spivak

953 Haight St, San Francisco, CA 94117; TEL. 861-5182

10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM

Expiration date: 03/25/94

RAD - Joe Konopka

544 Ashbury St, San Francisco, CA 94117; TEL. D 338-2764/E 861-0256

Mon 2/28/94: 7:00-9:00PM

Expiration date: 03/01/94

San Francisco Support Group for Adults with Dyslex - William Reed

1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116

1st Mondays: 7:00-9:00PM

Expiration date: 05/31/94

Sri Chinmoy Center - Charlie Rebich

529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626

Tues 3/22 & 3/29/94: 6:00-10:00PM

Expiration date: 02/23/94

Potrero Branch

Potrero Women's Club - Margaret Rice

528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423

2nd Wednesdays: 1:00-3:00PM

Expiration date: 03/31/94

Presidio Branch

Post-polio Support Group - Nancy P. Norris

405 Davis Court #1007, San Francisco, CA 94111; TEL. 788-2115

Biweekly Thursdays, Aug. 1993 to Feb. 1994: 3:00-5:00PM

Expiration date: 02/25/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/18/94

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Western Addition Branch

American Chronic Pain Association - Janet Raiche

154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353

10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM

Expiration date: 03/31/94

National Council of Negro Women - Willie B. Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734

Sat 9/18, 10/16, 11/20, 12/18/93, 1/15 & 2/19/94: 2:00-5:00PM

Expiration date: 02/20/94

San Francisco Esperanto Regional Organization - Charles E. Galvin, Jr.

121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783

1st Saturdays 9/4/93 - 2/5/94: 1:00-4:00PM

Expiration date: 02/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery

111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975

3rd Tuesdays: 1:00-2:30PM

Expiration date: 03/31/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 28 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| Dates Requested: ATTACHED. | Time Requested: AFTER HOURS: 6:00 thru 9:00 pm |
| Facility: BAYVIEW- WADEN #13 | Attendance Expected: _____ |
| Describe event or purpose of meeting: <div style="font-size: 1.2em; font-family: sans-serif;">FIRE FIGHTER'S EXAM PREPARATIONS</div> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: O.M.I. | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: _____ | |
| Primary Contact Person: LARRY CHEW | Position in Group: EXECUTIVE DIRECTOR |
| Full Mailing Address: 446 RANDOLPH ST | |
| Day Phone: (415) 584-2188 | Evening Phone: _____ |
| Secondary Contact Person: DARLENE FRANKLIN | Position in Group: _____ |
| Full Mailing Address: 446 RANDOLPH ST | |
| Day Phone: (415) 584-8188 | Evening Phone: (415) 822-4248 |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

O.M.I. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the O.M.I. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on O.M.I. (group or organization), its agents or employee.

O.M.I. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Darlene Franklin (signature) 1/26/94 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

DOCUMENTS DEPT.

FEB 1 1994

**SAN FRANCISCO
PUBLIC LIBRARY**

February 1994

OMI COMMUNITY ASSOCIATION

SUNDAY

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

| | | | | | | |
|----|--------------------------|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------|--------------|-----------------------------|
| 6 | 7 | 8 | 9 | 10 ● NM | 11 | 12 Lincoln's Birthday |
| 13 | 14 Valentine's Day | 16 | 16 Ash Wednesday | 17 | 18 ● PQ | 19 |
| 20 | 21 President's Day | 22 Washington's Birthday Sunnydale Potrero CDC Bayview | 23 O.M.I. Sunnydale Potrero CDC | 24 O.M.I. Sunnydale Potrero CDC Bayview... | 25 O.P.M. | 26 |
| 27 | 28 O.M.I. | | | | | |

January


| S | M | T | W | T | F | S |
|----|----|----|----|----|----|----|
| 2 | 3 | 4 | 5 | 6 | 7 | 1 |
| 9 | 10 | 11 | 12 | 13 | 14 | 8 |
| 16 | 17 | 18 | 19 | 20 | 21 | 15 |
| 23 | 24 | 25 | 26 | 27 | 28 | 22 |
| 30 | 31 | | | | | 29 |

March

| S | M | T | W | T | F | S |
|----|----|----|----|----|----|----|
| | 1 | 2 | 3 | 4 | 5 | |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | | |

March 1994

OMI COMMUNITY ASSOCIATION

| SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
|---------------------------|---------------------------------------------|------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------|
| | | 1 Sunnydale Potrero CDC Bayview... | 2 O.M.I. Sunnydale Potrero CDC | 3 O.M.I. Sunnydale Potrero CDC Bayview.. | 4 10 Sunnydale Potrero CDC Bayview.. | 5 |
| 6 | 7 O.M.I. Bayview | 8 Sunnydale Potrero CDC Bayview | 9 O.M.I. Potrero CDC Sunnydale | 10 O.M.I. Sunnydale Potrero CDC Bayview... | 11 | 12 NM |
| 13 | 14 O.M.I. | 15 Sunnydale Potrero CDC Bayview | 16 O.M.I. Potrero CDC Sunnydale | 17  St. Patrick's Sunnydale Potrero CDC Bayview | 18 | 19 |
| 20 10 PM Spring begins | 21 O.M.I. Bayview | 22 Sunnydale Potrero CDC Bayview | 23 O.M.I. Potrero CDC Sunnydale | 24 O.M.I. Potrero CDC Sunnydale | 25 | 26 |
| 27 O PM Polar SUNDAY | 28 O.M.I. Bayview..... Last Exam Prep | 29 | 30 | 31 | | |

February

| S | M | T | W | T | F | S |
|----|----|----|----|----|----|----|
| | 1 | 2 | 3 | 4 | 5 | |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | | | | | |

April

| S | M | T | W | T | F | S |
|----|----|----|----|----|----|----|
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |

Math 101

Math 101 is a course for students who are new to college-level mathematics.

The course covers basic algebra, geometry, and trigonometry.

Students will learn how to solve equations and inequalities.

They will also learn how to graph functions and solve problems.

The course is designed to be a foundation for more advanced mathematics.

Students who complete the course will be prepared for Math 102.

The course is taught by experienced instructors who are passionate about teaching.

Students are encouraged to ask questions and participate in class.

The course is a required part of the Mathematics major.

Students who are interested in a career in science or engineering should take this course.

The course is a great way to learn the basics of mathematics.

Students will gain a solid understanding of the concepts and techniques.

The course is a challenging but rewarding experience.

Students who take this course will be well-prepared for the future.

The course is a key component of the Mathematics program.

Students who complete the course will have a strong foundation in mathematics.

The course is a great introduction to the world of mathematics.

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

FEB 10 1994

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| Dates Requested: <u>2/22/94 (Thu)</u> | Time Requested: <u>7:00 PM</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>approx 30-40 people</u> |
| Describe event or purpose of meeting: <u>to organize merchant to address some of the problem keeping people from shopping on Haight Street</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Haight Ashbury Merchants</u> | Non-Profit: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>organize the merchants on Haight St.</u> | |
| Primary Contact Person: <u>Judy Gilman (member - merchant)</u> | Position in Group: _____ |
| Full Mailing Address: <u>21 1408 HAIGHT ST SF 94112</u> | |
| Day Phone: <u>415-863-2837</u> | Evening Phone: <u>863-3148</u> |
| Secondary Contact Person: <u>Bill Hoover</u> | Position in Group: <u>INTERIM PRES. H.A. MERCHANT ASS.</u> |
| Full Mailing Address: <u>1400 HAIGHT (Haight St) SF 94112</u> | |
| Day Phone: <u>255-1180</u> | Evening Phone: <u>648-3174</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Haight Ashbury Merchants (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the H.A. Merchants (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on H.A. Merchants (group or organization), its agents or employee.

H.A. Merchants (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Judy Gilman (signature) 2/9/94 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____ DOCUMENTS DEPT. _____

BY: BRANCH/MAIN MANAGER: Paul S. Osse FEB 16 1994



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

FEB 15 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------|--------------------------------|
| Dates Requested: <u>2/22 and 2/29</u> | Time Requested: <u>6-10</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>60</u> |
| Describe event or purpose of meeting: <u>Introductory Meditation Seminar</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Sri Chinmay Center</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Meditation group offering classes as a community service</u> | |
| Primary Contact Person: <u>Charlie Rebich</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>529 Moraga St.</u> | |
| Day Phone: <u>552-2443</u> | Evening Phone: <u>665-8626</u> |
| Secondary Contact Person: <u>Golapendu Ng</u> | Position in Group: <u>Co-coordinator</u> |
| Full Mailing Address: <u>529 Moraga St.</u> | |
| Day Phone: <u>552-2443</u> | Evening Phone: <u>665-8626</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Sri Chinmay Center (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Sri Chinmay Center (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmay Center (group or organization), its agents or employee.

Sri Chinmay Center (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

[Signature] (signature) 2/14/94 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Vos

DOCUMENTS DEPT.

FEB 16 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 7 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-------------------------------------------------------------------------|----------------------------------|
| Dates Requested: <u>2/23/94</u> | Time Requested: <u>6:30 p.m.</u> |
| Facility: <u>BAYVIEW - WADEN #13</u> | Attendance Expected: <u>40</u> |
| Describe event or purpose of meeting: <u>Enterprise Zone Seminar</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Urban Economic Development Grp.</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Enterprise Zone Seminar</u> | |
| Primary Contact Person: <u>Matthew Thomas</u> | Position in Group: <u>Sr. Marketing Consultant</u> |
| Full Mailing Address: <u>1426 Fillmore St. #205 S.F. CA 94115</u> | |
| Day Phone: <u>415-923-0105</u> | Evening Phone: <u>415-777-9433</u> |
| Secondary Contact Person: <u>Coker Marshall</u> | Position in Group: _____ |
| Full Mailing Address: _____ | |
| Day Phone: <u>923-0105</u> | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

UEDC (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the UEDC (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on UEDC (group or organization), its agents or employee.

UEDC (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Matthew Thomas (signature) 1/6/94 (date)

SPECIAL AUTHORIZATION:
 REFRESHMENTS: _____ (initials of authorizing authority).

FEEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

Expiration Date: April 1, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

FEB 9 1994

| | |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Dates Requested: February 24, 1994 | Time Requested: 6:00 p.m. to 10:00 p.m. |
| Facility: Park Branch Community Room | Attendance Expected: 40 - 60 people |
| Describe event or purpose of meeting: Discussion of community issues, usually with guest speakers. | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------|
| Name of Group: Cole Valley Improvement Association | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Discussions of community issues | | |
| Primary Contact Person: Karen Crommie | | Position in Group: President |
| Full Mailing Address: 628 Ashbury St., S.F. 94117 | | |
| Day Phone: (415) 431-1414 | Evening Phone: (415) 431-1414 | |
| Secondary Contact Person: Doerte Murray | | Position in Group: Treasurer |
| Full Mailing Address: 526 Clayton St., S.F., 94117 | | |
| Day Phone: 626-3607 | Evening Phone: 626-3607 | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Cole Valley Improvement Assn. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Cole Valley Imp. Assn. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Cole Valley Imp. Assn. (group or organization), its agents or employee.

Cole Valley Imp. Assn. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Karen Lee Crommie (signature) Nov. 1, 1993 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____

Key Deposit: \$ _____ rec'd/waived by: _____

Janitorial: \$ _____ rec'd/waived by: _____

DOCUMENTS DEPT.

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

FEB 16 1994

BY: BRANCH/MAIN MANAGER: Pete S. Vos

SAN FRANCISCO
PUBLIC LIBRARY

1. Name of the person or organization to whom the letter is addressed.

2. Address of the person or organization to whom the letter is addressed.

3. Date of the letter.

4. Signature of the person or organization sending the letter.

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

FEB 15 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | | | |
|-------------------------------------------------------------------------------------------------------|----------------------------|----------------------|-------------------------|
| Date Requested: | February 24, 1994 | Time Requested: | 6:00 p.m. to 10:00 p.m. |
| Facility: | Park Branch Community Room | Attendance Expected: | 40 - 60 people |
| Describe event or purpose of meeting: Discussion of community issues, usually with guest speakers. | | | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | | |
|------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------|--|
| Name of Group: Cole Valley Improvement Association | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> | |
| Purpose of Group/Type of Activities to Take Place in the Library: Discussions of community issues | | | |
| Primary Contact Person: Karen Cronnie | | Position in Group: President | |
| Full Mailing Address: 628 Ashbury St., S.F. 94117 | | | |
| Day Phone: (415) 431-1414 | | Evening Phone: (415) 431-1414 | |
| Secondary Contact Person: Doerte Murray | | Position in Group: Treasurer | |
| Full Mailing Address: 526 Clayton St., S.F., 94117 | | | |
| Day Phone: 626-3607 | | Evening Phone: 626-3607 | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Cole Valley Improvement Assn. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Cole Valley Imp. Assn. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Cole Valley Imp. Assn. (group or organization), its agents or employee.

Cole Valley Imp. Assn. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Karen Lynne Cronnie (signature) Feb. 10, 1994 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: P. S. Vos

DOCUMENTS DEPT.

FEB 16 1994

SAN FRANCISCO
PUBLIC LIBRARY

DECLASSIFICATION AUTHORITY

1. This document is classified "CONFIDENTIAL - SECURITY INFORMATION" pursuant to Executive Order 11652, February 2, 1976, and is to be declassified on the date of the President's proclamation.

2. The information contained herein is the property of the United States Government and is loaned to you for your official use only. It is not to be distributed outside your agency without the express written permission of the originating agency.

3. This document is to be controlled and handled in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder, and is to be stored in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder.

4. This document is to be controlled and handled in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder, and is to be stored in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder.

5. This document is to be controlled and handled in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder, and is to be stored in accordance with the provisions of the Atomic Energy Act of 1954, as amended, and the regulations promulgated thereunder.

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FEB 23 1994

SAN FRANCISCO
PUBLIC LIBRARYSAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/25/94

Page 1

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill

3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035

Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM

Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd

3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946

Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM

Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen

4477 Mission St, San Francisco, CA 94112; TEL. 587-1231

4th Wednesdays: 6:30-8:30PM

Expiration date: 06/23/94

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus

492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753

1st Wednesdays: 7:30-9:00PM

Expiration date: 03/31/94

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/25/94

Page 2

Park Branch

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Green Party County Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Mondays: 7:00PM

Expiration date: 03/15/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight-Ashbury Improvement Association - Ed Spivak

953 Haight St, San Francisco, CA 94117; TEL. 861-5182

10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM

Expiration date: 03/25/94

RAD - Joe Konopka

544 Ashbury St, San Francisco, CA 94117; TEL. D 338-2764/E 861-0256

Mon 2/28/94: 7:00-9:00PM

Expiration date: 03/01/94

San Francisco Support Group for Adults with Dyslex - William Reed

1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116

1st Mondays: 7:00-9:00PM

Expiration date: 05/31/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

02/25/94

Page 3

Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00-3:00PM
Expiration date: 03/31/94

Western Addition Branch

American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
Expiration date: 03/31/94

San Francisco Esperanto Regional Organization - Charles E. Calvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
1st Saturdays 9/4/93 - 2/5/94: 1:00-4:00PM
Expiration date: 02/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JAN 24 1994
 (Adopted 9/15/92)

Expiration Date: 3/1/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------|--------------------------------|
| Dates Requested: <u>2/28/94</u> | Time Requested: <u>2-4 PM</u> |
| Facility: PARK | Attendance Expected: <u>70</u> |
| Describe event or purpose of meeting: <u>New Member Ship</u> | |

DOCUMENTS DEPT.
 JAN 25 1994
 SAN FRANCISCO
 PUBLIC LIBRARY

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: RAD | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: RALLY | |
| Primary Contact Person: Steve Konopka | Position in Group: PRESIDENT |
| Full Mailing Address: 344 ASHBURY | |
| Day Phone: 338-2764 | Evening Phone: 861-0256 |
| Secondary Contact Person: Ethel Konopka | Position in Group: |
| Full Mailing Address: same | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

RAD (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the RAD (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on RAD (group or organization), its agents or employee.

RAD (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Joe Konopka (signature) 1/21/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Pete S. Vose

MAR 7 1994

SAN FRANCISCO
PUBLIC LIBRARYSAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher

1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660

Every other Thursday: 3:15-4:00PM

Expiration date: 09/30/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill

3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035

Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM

Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd

3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946

Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM

Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen

4477 Mission St, San Francisco, CA 94112; TEL. 587-1231

4th Wednesdays: 6:30-8:30PM

Expiration date: 06/23/94

International Training in Communication - David Gore

875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719

Sat 5/14 & 6/11/94: 12:00-4:00PM

Expiration date: 06/12/94

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus

492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753

1st Wednesdays: 7:30-9:00PM

Expiration date: 03/31/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Green Party County Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Mondays: 7:00PM

Expiration date: 03/15/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

Page 3

Park Branch

Haight-Ashbury Improvement Association - Ed Spivak
953 Haight St, San Francisco, CA 94117; TEL. 861-5182
10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM
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San Francisco Support Group for Adults with Dyslex - William Reed
1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00-3:00PM
Expiration date: 03/31/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Western Addition Branch

American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
Expiration date: 03/31/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
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Every other Thursday: 3:15-4:00PM
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Bernal Heights Branch

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Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

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Playreading - Saul Fenster

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San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Green Party County Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Mondays: 7:00PM

Expiration date: 03/15/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

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Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/03/94

Page 3

Park Branch

Haight-Ashbury Improvement Association - Ed Spivak
953 Haight St, San Francisco, CA 94117; TEL. 861-5182
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Potrero Women's Club - Margaret Rice
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2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

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American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
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The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 3 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------|-------------------------------------------|
| Dates Requested: every other Thursday | Time Requested: 3:15 p.m. to 4:00 p.m. |
| Facility: BAYVIEW- WADEN #13 | Attendance Expected: |
| Describe event or purpose of meeting: Use video equipment | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: Burnett children's Center | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: watch a movie | |
| Primary Contact Person: Ana FISHER | Position in Group: Teacher |
| Full Mailing Address: 1520 Oakdale Av. S.F. CA 94124 | |
| Day Phone: 585-0414-6955660 | Evening Phone: 585-0414 |
| Secondary Contact Person: | Position in Group: |
| Full Mailing Address: | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

_____ (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the _____ (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on _____ (group or organization), its agents or employee.

_____ (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

_____ (signature)

_____ (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
Key Deposit: \$ _____ rec'd/waived by: _____
Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

DOCUMENTS DEPT

MAR 4 1994

SAN FRANCISCO

VIEW PR.

7-8:45

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

MAR 9 1994

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: 21st Century Academy Parents
PURPOSE OF ORGANIZATION: Parents meeting to write parents-
school plans
TYPE OF ACTIVITIES taking place in the Library: Parent meeting

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: Kimberly Brown
ADDRESS: 1722 Quesada Ave
TELEPHONE: (415) 822-6410
OFFICIAL CAPACITY: Parent member

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: Paula Mason Telephone: 468-5859
NAME: Niletta Johnson Telephone: 567-9617
Valarie McCoy 842-6208

SPACE REQUESTED:

DATE(S): March 16, 1994 Hours: 7pm to 8:45pm

APPROXIMATE ATTENDANCE: 50 adults

OTHER INFORMATION: might serve refreshments (cake & coffee)

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT
MAR 1 1994
SAN FRANCISCO
PUBLIC LIBRARY



SF
P75
#31a
3-16-94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 16 1994 Adopted 9/15/92

Expiration Date: _____

OTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------|--------------------------------|
| Dates Requested: Wed. Mar 16, 1994 | Time Requested: 6:00-10:00 PM |
| Facility: Park Branch Meeting Room | Attendance Expected: 25 People |
| Describe event or purpose of meeting: Ratify Bylaws for our organization | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: California Outdoor Rollerskating Association | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Promote Outdoor Rollerskating / Create Governing Board | |
| Primary Contact Person: David G. Miles Jr. | Position in Group: President |
| Full Mailing Address: 777-5th Ave #3 S.F. CA. 94118 | |
| Day Phone: 415-752-1967 | Evening Phone: Same |
| Secondary Contact Person: Art Howard | Position in Group: Supporter |
| Full Mailing Address: 2549 Irving Ave S.F. CA. 94122 | |
| Day Phone: 415-752-8776 | Evening Phone: 661-1229 |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐ If yes, attach insurance rider.

Ca. Outdoor Rollerskating (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Ca. Outdoor Rollerskating (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Ca. Outdoor Rollerskating Ass. (group or organization), its agents or employee.

Ca. Outdoor Rollerskating (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

David G. Miles Jr. (signature) March 11, 1994 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Wase

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MAR 21 1994

SAN FRANCISCO
PUBLIC LIBRARYSAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/18/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

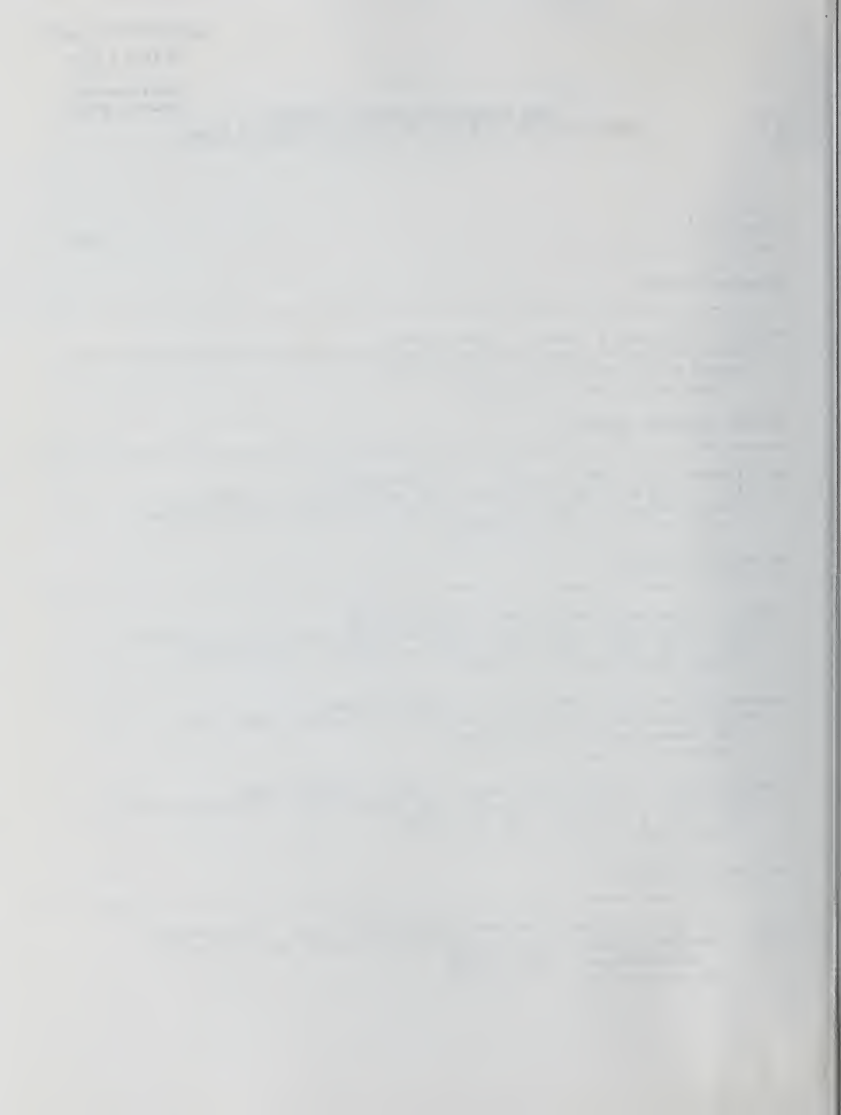
CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/18/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Wed 4/13/94: 7:30-10:00PM

Expiration date: 04/14/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

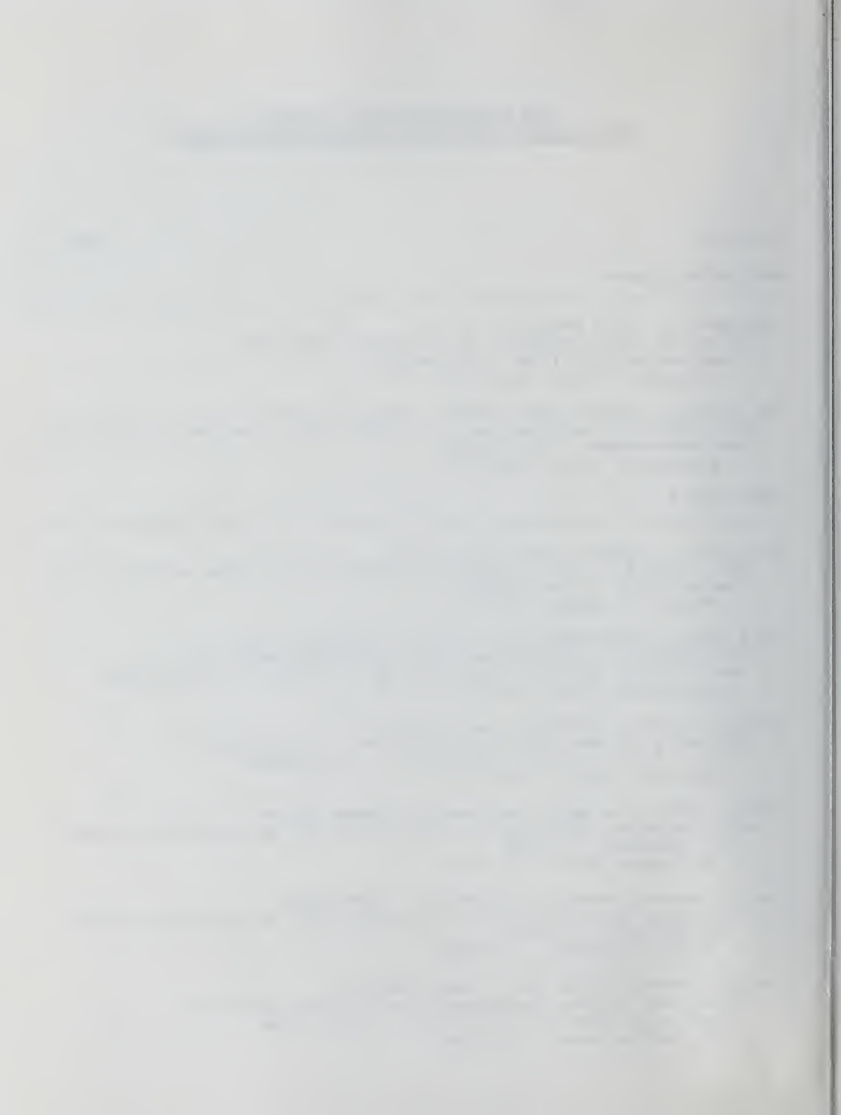
Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/18/94

Page 3

Park Branch

Haight Street Merchants - Bill Hoover

1400 Haight St, San Francisco, CA 94117; TEL. D 255-1180/E 648-3174

Wed 3/23/94: 7:00PM

Expiration date: 03/24/94

Haight-Ashbury Improvement Association - Ed Spivak

953 Haight St, San Francisco, CA 94117; TEL. 861-5182

10/21; 11/18; 12/16/93; 1/20,27; 2/17; 3/17,24/94: 7:30-10:00PM

Expiration date: 03/25/94

Park Police District Community Relations Mtg. - Michael Gannon

Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7

Thurs 5/5 & 8/4/94: 7:00-9:00PM

Expiration date: 08/05/94

San Francisco Support Group for Adults with Dyslex - William Reed

1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116

1st Mondays: 7:00-9:00PM

Expiration date: 05/31/94

Potrero Branch

Potrero Women's Club - Margaret Rice

528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423

2nd Wednesdays: 1:00PM

Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-

862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251

2nd Wednesdays beg. 4/13/94: 6:30-8:00PM

Expiration date: 10/12/94

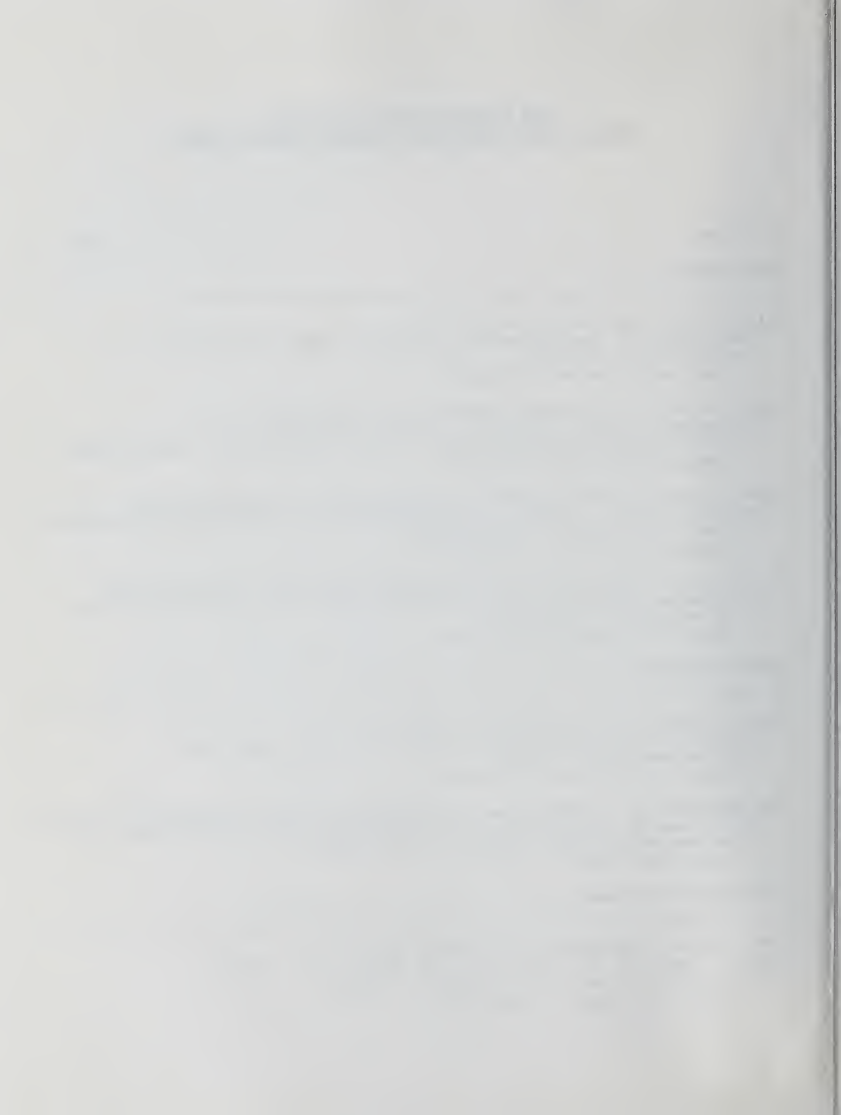
Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues

566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471

Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM

Expiration date: 11/04/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/18/94

Page 4

Western Addition Branch

American Chronic Pain Association - Janet Raiche

154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93; 2nd & 4th Th in 1994: 1:15-3:15PM
Expiration date: 03/31/94

National Council of Negro Women - Willie Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye

2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.

121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery

111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 11 1994
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------|-----------------------------------|
| Date Requested: <u>3/23/94</u> | Time Requested: <u>7:00 PM.</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>35-40</u> |
| Describe event or purpose of meeting: <u>meeting of Haecht Street merchants</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Haecht Street Merchants</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>talk about issues of concern to people doing business in Haecht St</u> | |
| Primary Contact Person: <u>Bill Hoover</u> | Position in Group: <u>president</u> |
| Full Mailing Address: <u>1400 Haecht St (Gallery of Jewels)</u> | |
| Day Phone: <u>255-1180</u> | Evening Phone: <u>648-3124</u> |
| Secondary Contact Person: <u>Judith Gilman</u> | Position in Group: <u>on board of director</u> |
| Full Mailing Address: <u>1408 Haecht St SE Ca 94117</u> | |
| Day Phone: <u>863-2837</u> | Evening Phone: <u>863-3148</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

1. Street Merchants (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the H.S.M. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on H.S.M. (group or organization), its agents or employee.

H.S. Merchants (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Judith Gilman (signature) 3/11/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____
☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Vose

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that proper record-keeping is essential for the transparency and accountability of the organization. This section also outlines the various methods used to collect and analyze data, ensuring that the information is reliable and up-to-date.

2. The second part of the document focuses on the implementation of the proposed changes. It details the steps involved in the transition process, from the initial planning phase to the final execution. This section highlights the challenges faced during the implementation and the strategies used to overcome them. It also provides a timeline for the completion of the project, ensuring that all stakeholders are aware of the progress and can provide input as needed.

3. The third part of the document discusses the future of the organization. It outlines the long-term goals and the strategies to achieve them. This section also addresses the potential risks and opportunities that may arise in the future. It emphasizes the need for continuous improvement and innovation to stay competitive in the market. The document concludes with a statement of commitment to the organization's mission and vision, and a call to action for all employees to work together to achieve the common goals.

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/25/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

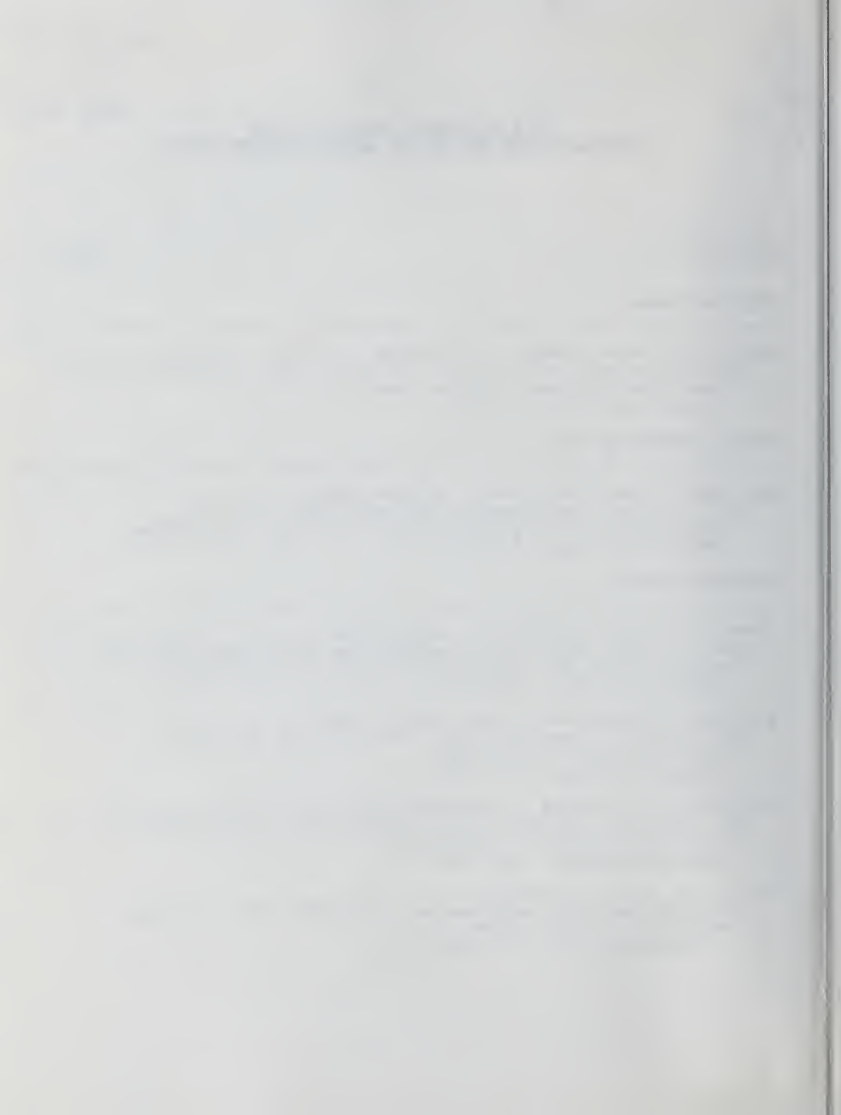
Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SEIU Local 250 - Daz Lamparas
240 Golden Gate Ave, San Francisco, CA 94102; TEL. 441-2500
Wed 4/6/94: 2:30-4:00PM
Expiration date: 04/07/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/25/94

Page 2

Noe Valley Branch

East and West of Castro Street Improvement Club - Paul Kantus
492 Douglas Street, San Francisco, CA 94114; TEL. 647-3753
1st Wednesdays: 7:30-9:00PM
Expiration date: 03/31/94

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell
511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759
4th Wednesdays: 6:00-8:45PM
Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Wed 4/13/94: 7:30-10:00PM
Expiration date: 04/14/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM
Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard
2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898
1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM
Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
3rd Thursdays: 1:00PM
Expiration date: 07/22/94

THE HISTORY OF THE

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/25/94

Page 3

Park Branch

Haight Ashbury Street Fair - Pablo Heising
952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025
Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM
Expiration date: 06/01/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

San Francisco Support Group for Adults with Dyslex - William Reed
1390 Market St #1408, S. F., CA 94102; TEL. D 905-1491/E 626-4116
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Sri Chinmoy Center - Golapendu Ng
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
Thurs 4/21/94: 6:00-10:00PM
Expiration date: 04/22/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

THE HISTORY OF THE

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

03/25/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

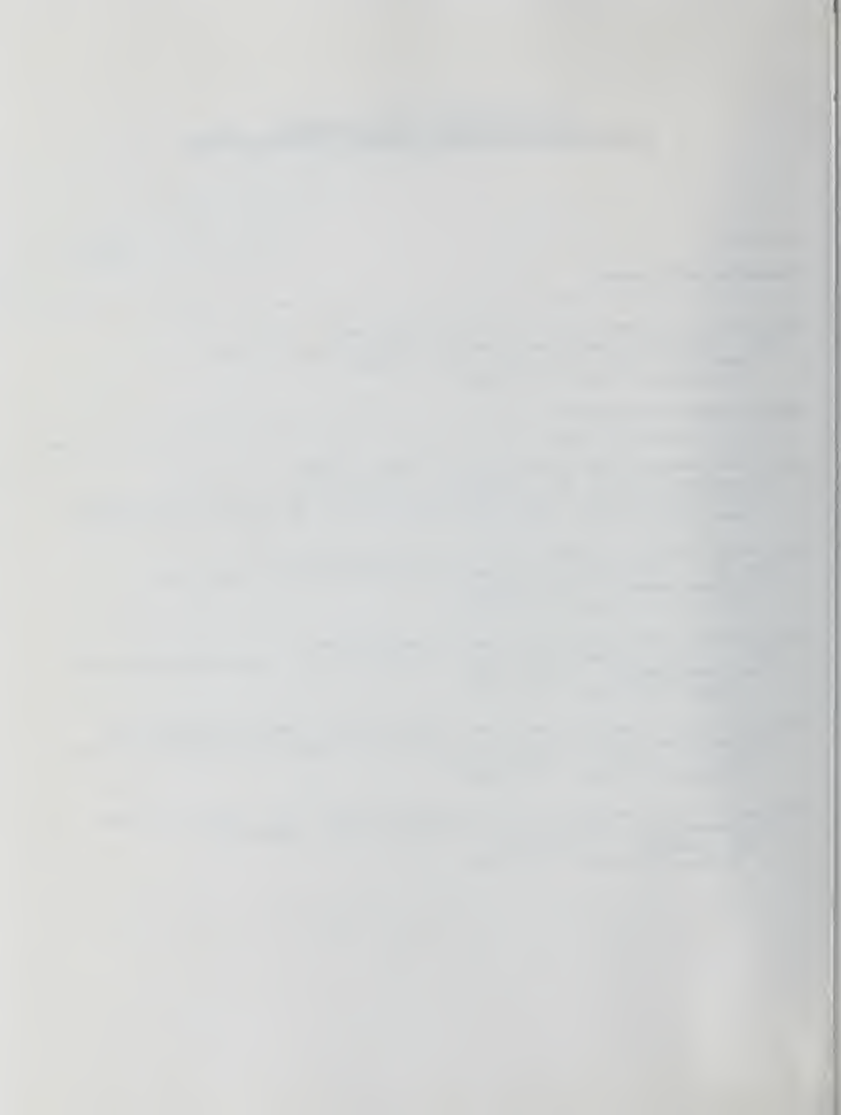
American Chronic Pain Association - Janet Raiche
154 Lombard St #49, San Francisco, CA 94111; TEL. 391-1353
10/14,28; 11/4,18; 12/2,16/93;2nd & 4th Th in 1994: 1:15-3:15PM
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National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Bro. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays: 1:00-2:30PM
Expiration date: 03/31/94



Bayview

MAR 25 1994

fup

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: URBAN ECONOMIC DEVELOPMENT CORPORATION

PURPOSE OF ORGANIZATION: Economic Development

TYPE OF ACTIVITIES taking place in the Library: Enterprise Zone seminar

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: Matthew Thomas

ADDRESS: 1426 Fillmore St., Suite 205 San Francisco, CA 94115

TELEPHONE: 923-0105

OFFICIAL CAPACITY: Sr. Marketing Consultant

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: Rod Valdepenas Telephone: 923-0105

NAME: _____ Telephone: _____

SPACE REQUESTED: Bayview, Ana E. Walden Library meeting room

DATE(S): March 30, 1994 Hours: 6:00pm to 9:00pm

APPROXIMATE ATTENDANCE: 45

OTHER INFORMATION: Supervisor Kevin Shelley will be guest speaker

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

Approved A. B. [Signature]
3/24/94

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT.
MAR 31 1994
SAN FRANCISCO
PUBLIC LIBRARY



MAR 25 1994

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

SFPL-15

(5/92)

Application Date: 3/24/94

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------------------|--------------------------------|
| Dates Requested: <u>3/30/94</u> | Time Requested: <u>1:30 PM</u> |
| Facility: <u>Western Addition</u> | Attendance Expected: <u>11</u> |
| Describe event or purpose of meeting: <u>General organizational meeting</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>MetWest Clinical Lab</u> | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>DISCUSSION / ORGANIZATIONAL</u> | |
| Primary Contact Person Applying: <u>Manny</u> | Position in Group: <u>Manager</u> |
| Full Mailing Address: <u>2201 Post Street San Francisco, CA 94115</u> | |
| Day Phone: <u>415 / 346-1299</u> | Evening Phone: <u>415 / 588-4348</u> |
| Secondary Contact Person: <u>Jean</u> | Position in Group: <u>Adm. Asst.</u> |
| Full Mailing Address: <u>2201 Post St. San Francisco, CA 94115</u> | |
| Day Phone: <u>415 / 931-6492</u> | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒. If yes, attach insurance rider.

I certify I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Jean J. Hernandez (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: _____

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ initials of authorizing authority

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
Key Deposit: \$ _____ rec'd/waived by: _____
Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Nancy Jackson

DOCUMENTS DEPT.

SAN FRANCISCO
PUBLIC LIBRARY

THE UNIVERSITY OF CHICAGO
DEPARTMENT OF CHEMISTRY

CHICAGO, ILLINOIS

RECEIVED BY THE UNIVERSITY OF CHICAGO LIBRARY

| | |
|---------|----------|
| NAME | DATE |
| ADDRESS | TIME |
| CITY | INITIALS |
| STATE | REMARKS |

1. The first part of the experiment was to determine the effect of temperature on the rate of reaction. The reaction was carried out at three different temperatures: 25°C, 35°C, and 45°C. The rate of reaction was measured by the change in color of the solution over time. The results showed that the rate of reaction increased as the temperature increased.

2. The second part of the experiment was to determine the effect of concentration on the rate of reaction. The reaction was carried out at three different concentrations: 0.1M, 0.2M, and 0.3M. The rate of reaction was measured by the change in color of the solution over time. The results showed that the rate of reaction increased as the concentration increased.

3. The third part of the experiment was to determine the effect of catalyst on the rate of reaction. The reaction was carried out with and without a catalyst. The rate of reaction was measured by the change in color of the solution over time. The results showed that the rate of reaction was significantly faster when a catalyst was used.

4. The fourth part of the experiment was to determine the effect of surface area on the rate of reaction. The reaction was carried out with two different surface areas: a large surface area and a small surface area. The rate of reaction was measured by the change in color of the solution over time. The results showed that the rate of reaction was faster when a larger surface area was used.

5. The fifth part of the experiment was to determine the effect of pressure on the rate of reaction. The reaction was carried out at two different pressures: 1 atm and 2 atm. The rate of reaction was measured by the change in color of the solution over time. The results showed that the rate of reaction was faster at a higher pressure.

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

FEB 25 1994
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------|--------------------------------------------|
| Dates Requested: <u>MAR. 31, Apr. 26, MAY 31</u> | Time Requested: <u>7:00 pm - 7:45</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>DOZEN - DOZ YL</u> |
| Describe event or purpose of meeting: <u>HAUGHS ST. FAIR Annual Meetings</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|---------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>HAUGHS Ashbury STREET Fair</u> | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Annual Meetings</u> | | |
| Primary Contact Person: <u>Pablo Herson</u> | Position in Group: <u>ORGANIZER</u> | |
| Full Mailing Address: <u>902 Ashbury ST. SF 94117</u> | | |
| Day Phone: <u>661-8015</u> | Evening Phone: <u>SAME</u> | |
| Secondary Contact Person: <u>Lawrence Herson</u> | Position in Group: <u>ASST ORG.</u> | |
| Full Mailing Address: <u>1124 Clifton ST.</u> | | |
| Day Phone: <u>666-9779</u> | Evening Phone: <u>SAME</u> | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

H.A. STREET Fair (Identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the H.A. STREET Fair (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on H.A. STREET Fair (group or organization), its agents or employee.

H.A. STREET Fair (Identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

(Signature) (signature) FEB 24, 1994 (date).

DOCUMENTS DEPT.

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

FEB 28 1994

SAN FRANCISCO
 PUBLIC LIBRARY

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Rob S. Vose



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/01/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

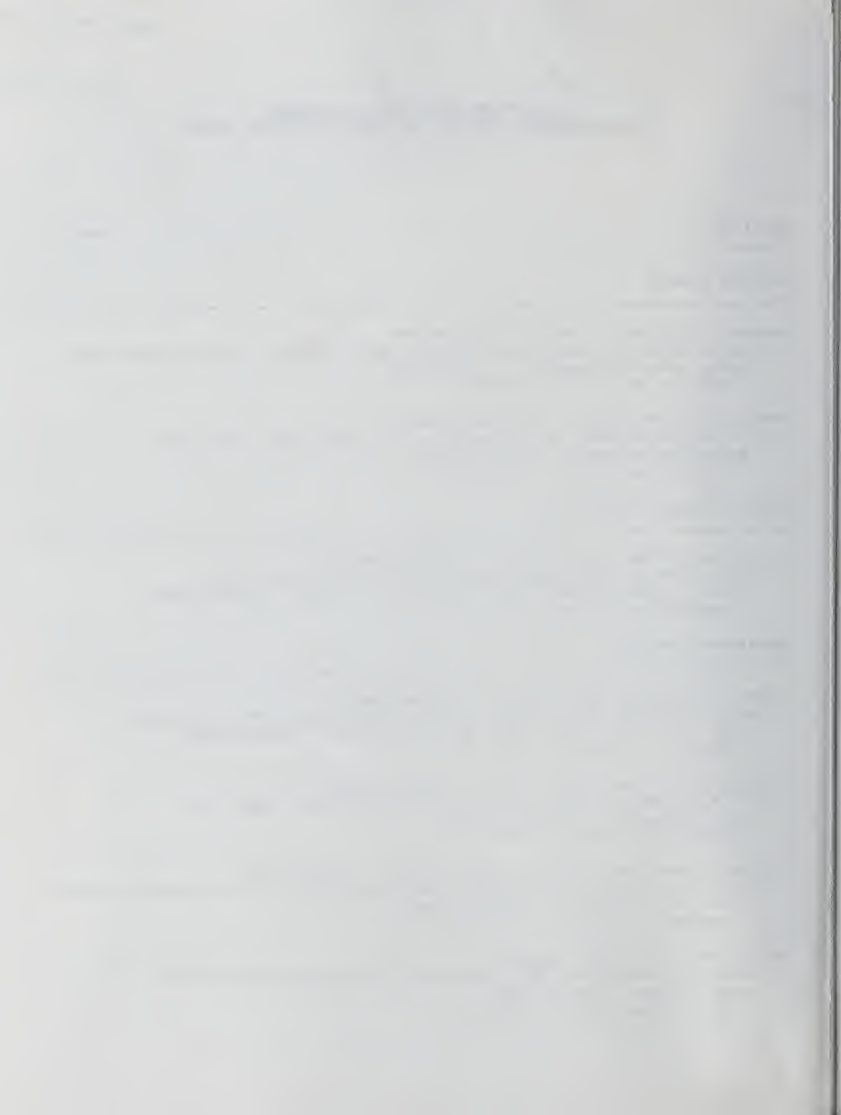
Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SEIU Local 250 - Daz Lamparas
240 Golden Gate Ave, San Francisco, CA 94102; TEL. 441-2500
Wed 4/6/94: 2:30-4:00PM
Expiration date: 04/07/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/01/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Wed 4/13/94: 7:30-10:00PM

Expiration date: 04/14/94

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/01/94

Page 3

Park Branch

Haight Ashbury Street Fair - Pablo Heising
952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025
Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM
Expiration date: 06/01/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Sri Chinmoy Center - Golapendu Ng
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
Thurs 4/21/94: 6:00-10:00PM
Expiration date: 04/22/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/01/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/01/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
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Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 21 1994
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------|------------------------------------------------------------------|
| Dates Requested: <u>First Saturday of each Month</u> | Time Requested: <u>1pm to 6pm (starting earlier is poss.)</u> |
| Facility: <u>Footeney Branch Meeting Room</u> | Attendance Expected: <u>25 people</u> |
| Describe event or purpose of meeting: <u>Computer User Group Meeting</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Atari Bay Area Computer Users Society (Abacus)</u> | | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Computer Demonstrations, Socializing</u> | | |
| Primary Contact Person: <u>Roger Sinasohn</u> | Position in Group: <u>PRESIDENT</u> | |
| Full Mailing Address: <u>1034 Capitol Ave, San Francisco, CA 94112-2212</u> | | |
| Day Phone: <u>(415) 469-7924</u> | Evening Phone: <u>SAME</u> | |
| Secondary Contact Person: <u>DEL SEVERY</u> | Position in Group: <u>Editor</u> | |
| Full Mailing Address: <u>2047 35th Avenue, SF CA 94116</u> | | |
| Day Phone: <u>(415) 664-0850</u> | Evening Phone: <u>SAME</u> | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

ABACUS (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the ABACUS (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on ABACUS (group or organization), its agents or employee.

ABACUS (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Roger Sinasohn, President (signature) 3/19/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: John H. Hing

MAR 18 1994

SAN FRANCISCO PUBLIC LIBRARY

EXCELSIOR BRANCH

10/70

Request for Use of Public Meeting Rooms

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: SEIU LOCAL 250PURPOSE OF ORGANIZATION: JEWISH HOME WORKERS MEETING - UNIONTYPE OF ACTIVITIES taking place in the Library: UNION MEMBERSHIP MEETING

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: DAZ LAMPARASADDRESS: 240 GOLDEN GATE AVE.TELEPHONE: (415) 441-2520OFFICIAL CAPACITY: FIELD REPRESENTATIVE

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: EILEEN ABALOSTelephone: JHANAME: LINDA SORDOVATelephone: DIETARY DEPT. - 334 - 2520SPACE REQUESTED: MEETING HALLDATE(S): APRIL 6, 1994Hours: 2:30 to 4:00 PMAPPROXIMATE ATTENDANCE: 15-20OTHER INFORMATION: WE WOULD LIKE TO USE VIDEO MONITOR

This form is to be completed and returned to:

Chief of the Main Library
 San Francisco Public Library
 Civic Center
 San Francisco, CA 94102
 558-3471

OR

In case of Branch Library,
 return to the Librarian in
 charge of the branch where
 space is requested.

For further information call:
 558-3602

up

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION:

True Life Productions

PURPOSE OF ORGANIZATION:

Civic Plays to Read

TYPE OF ACTIVITIES taking place in the Library:

Theatrical reads and
Blocking

INDIVIDUAL IN CHARGE of meetings in Library:

NAME:

Darryl Larkins

ADDRESS:

1427 Underwood Ave

TELEPHONE:

822-1625

OFFICIAL CAPACITY:

10 people

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME:

Fabian Herd

Telephone:

386-1355

NAME:

Carolyn Mason

Telephone:

931-6989

SPACE REQUESTED:

Community Room

DATE(S):

4-6 - 5-25

Hours:

7

to

8:45

APPROXIMATE ATTENDANCE:

OTHER INFORMATION:

If at all possible we would like to extend
our time through May 1994.

This form is to be completed and returned to:

Approved: [Signature] 3/24/94

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT.
MAR 25 1994
SAN FRANCISCO
PUBLIC LIBRARY

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

DOCUMENTS DEPT.
APR 12 1994
SAN FRANCISCO
PUBLIC LIBRARY

04/07/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

TOSS Ministry Family Support - Sandra Brown
1611 Yosemite Ave #4, San Francisco, CA 94124; TEL. 822-9557
4/7 & 4/19/94: 6:30-9:30PM
Expiration date: 04/20/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/07/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Wed 4/13/94: 7:30-10:00PM

Expiration date: 04/14/94

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/07/94

Page 3

Park Branch

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

Park Police District Community Relations Mtg. - Michael Gannon

Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7

Thurs 5/5 & 8/4/94: 7:00-9:00PM

Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed

1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41

1st Mondays: 7:00-9:00PM

Expiration date: 05/31/94

Sri Chinmoy Center - Golapendu Ng

529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626

Thurs 4/21/94: 6:00-10:00PM

Expiration date: 04/22/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn

1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924

1st Saturdays: 1:00-6:00PM

Expiration date: 09/30/94

Potrero Women's Club - Margaret Rice

528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423

2nd Wednesdays: 1:00PM

Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-

862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251

2nd Wednesdays beg. 4/13/94: 6:30-8:00PM

Expiration date: 10/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/07/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: T.O.S.S. Ministry Family SupportPURPOSE OF ORGANIZATION: Community Meeting on Our children in the Public School District & Health Care Issues.TYPE OF ACTIVITIES taking place in the Library: Community Meeting

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: Sandra Brown, DirectorADDRESS: 1611 Yosemite Ave #2TELEPHONE: 822-9557OFFICIAL CAPACITY: ~~100~~ 100

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: Sandra Brown Telephone: 822-9557NAME: Commissioner Arthur Jockson Telephone: 546-4500SPACE REQUESTED: Community RoomDATE(S): April 7 & 19, 1994 Hours: 6:30 pm to 9:30 pmAPPROXIMATE ATTENDANCE: 25-50

OTHER INFORMATION:

This form is to be completed and returned to:Chief of the Main Library
San Francisco Public Library
Civic Center

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.For further information on
Branch meeting facilities call:

558-3602

T.O.S.S. Ministry Family Support
Education Volunteer Program

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

Expiration Date: Oct. 5, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-------------------------------------------------------------------------|--------------------------------------|
| Dates Requested: <u>2nd Wednesday of month</u> | Time Requested: <u>1:00 PM</u> |
| Facility: <u>meeting Room</u> | Attendance Expected: <u>10-20</u> |
| Describe event or purpose of meeting: <u>Charitable org + Social</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Name of Group: <u>Potrero Women's Club</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>To Socialize + do Charitable works</u> | |
| Primary Contact Person: <u>Margaret Rice</u> | Position in Group: <u>Secretary</u> |
| Full Mailing Address: <u>528 Arkansas Street</u> | |
| Day Phone: <u>824-7423</u> | Evening Phone: <u>Same</u> |
| Secondary Contact Person: <u>Dolores Maloney</u> | Position in Group: <u>V. President</u> |
| Full Mailing Address: <u>594 Arkansas St</u> | |
| Day Phone: <u>647-6729</u> | Evening Phone: <u>Same</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Potrero Club (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Potrero Club (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Potrero Club (group or organization), its agents or employee.

Potrero Club (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Margaret Rice (signature) 3-12-94 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

DOCUMENTS DEPT.

MAR 16 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 11 1994
SFPL-15
(5/92)

Application Date: MAR. 9, 1994

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------|----------------------------------------------|
| Dates Requested: <u>THURSDAY</u> <u>SECOND WED. OF APRIL</u> | Time Requested: <u>7PM - 8:45 PM</u> |
| Facility: <u>Western Addition Branch</u> | Attendance Expected: <u>10-12 PERSONS</u> |
| Describe event or purpose of meeting: <u>CLUB BOARD OF DIRECTORS MEETING</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>SAN FRANCISCO AMATEUR ASTRONOMERS</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>ASTRONOMICAL SOCIETY</u> | |
| Primary Contact Person Applying: <u>DENNIS TYR</u> | Position in Group: <u>PRASIDENT</u> |
| Full Mailing Address: <u>2960 21ST AVE. SAN FRANCISCO, CA 94132</u> | |
| Day Phone: <u>(415) 622-8993</u> | Evening Phone: <u>(415) 566-0587</u> |
| Secondary Contact Person: | Position in Group: |
| Full Mailing Address: | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒. If yes, attach insurance rider.

I certify I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Dennis Tyr (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: Oct. 30, 1994

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ initials of authorizing authority
FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
Key Deposit: \$ _____ rec'd/waived by: _____
Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Jean Jackson

DOCUMENTS DEPT.

MAR 29 1994

SAN FRANCISCO

PUBLIC LIBRARY



SAN FRANCISCO

Amateur Astronomers

SHARING THE WONDERS OF THE UNIVERSE

GENERAL INFORMATION

Founded in September, 1952, the San Francisco Amateur Astronomers (SFAA) is an association of people who share a common interest in astronomy and other related sciences. Our membership consists of people from all walks of life, educational backgrounds and ages. Many SFAA members have their own telescopes; some have been made by hand in local telescope-making classes and vary from 6 to 25 inches in diameter. For further information call our hotline (415) 905-6445

ACTIVITIES

The SFAA holds regular lecture meetings in the Morrison Planetarium, of the Academy of Sciences, in Golden Gate Park on the third Wednesday of each month (except January). These lectures are given by scientists and educators in the field of astronomy and are designed to hold the layperson's interest with slides and demonstrations, etc.

On the Saturday night nearest the new moon, the SFAA hosts star parties on Mt. Tamalpais, in Marin County. Just 16 miles north of the Golden Gate Bridge, Mt. Tam commands a darker sky than most areas in this vicinity. Here, SFAA members offer their telescopes and their assistance to the general public, in a sharing of the wonders of the universe. Star parties begin at dusk and continue past midnight on most clear evenings. Drugs and alcohol are specifically prohibited by the SFAA and the Mt. Tam rangers.

MEMBERSHIP

Members can receive subscription discounts on *Astronomy* and *Sky & Telescope* magazines and are invited to participate on special tours to YOSEMITE, Mt. Hamilton, etc. Yearly membership dues are:

| | | |
|----------|--------------------------|---------------------------|
| \$ 20.00 | Individual membership | |
| \$ 25.00 | Family Membership | (one bulletin per family) |
| \$ 25.00 | Institutional membership | (one bulletin per family) |
| \$ 5.00 | Youth membership | (under 18 years old) |

MEMBERSHIP APPLICATION

cut here ↓

San Francisco Amateur Astronomers**MEMBERSHIP APPLICATION**

Name: Telephone:

Address:

Select one category: ☐ \$ 20.00 enclosed, Individual membership
☐ \$ 25.00 enclosed, Family membership
☐ \$ 25.00 enclosed, Institutional membership
☐ \$ 5.00 enclosed, Youth membership

Make checks payable to SFAA and mail to: Treasurer, SFAA, 32 Penhurst Avenue,
 Daly City, California, USA 94015

JUN 15 1993

The Solar System Scale Model

Diameter Mass (x earth) Distance to Sun (x million miles)

| | | | | |
|------------|---------------|--------------|------------------|-----------|
| Sun | 865400 | 33420 | - | - |
| Mercury | 3100 | 0.037 | 36 | (3.5 ft) |
| Venus | 7700 | 0.82 | 67.2 | (6.5 ft) |
| Earth | 7925 | 1 | 93 | (9.0 ft) |
| Moon | 2160 | 0.0744 | 0.235 (to earth) | (0.3 in) |
| Mars | 4221 | 0.1076 | 141.7 | (13.6 ft) |
| Jupiter | 86770 | 316.35 | 484 | (46.6 ft) |

Saturn 71600 95.3 887 (85.4 ft)

Uranus 32400 14.6 1785 (171.9 ft)

Neptune 30900 17.26 2797 (269.3 ft)

Pluto 3670 0.10 3675 (353.9 ft)

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Dates Requested: <u>Monthly beginning Apr. 13 (SECOND THURSDAY)</u> Facility: <u>Potrero Hall</u> | Time Requested: <u>6:30 - 8:00</u> Attendance Expected: <u>10</u> |
| Describe event or purpose of meeting: <u>Educational wellness talks on general health topics</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>The Benefits Company and SOMA Acupuncture - Natural Health Clinic</u> | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Free Community outreach</u> | |
| Primary Contact Person: <u>Bill Hannant / Ann White</u> | Position in Group: <u>owner</u> |
| Full Mailing Address: <u>581 Texas Street, San Francisco CA 94107</u> | |
| Day Phone: <u>415 647-7012</u> | Evening Phone: <u>same</u> |
| Secondary Contact Person: <u>Michelle or Carl Hange-Bauer</u> | Position in Group: <u>owner</u> |
| Full Mailing Address: <u>862 Folsom Street, San Francisco CA 94107</u> | |
| Day Phone: <u>415 974-5596</u> | Evening Phone: <u>415 285-0251</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

SOMA ACUPUNCTURE (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the SOMA ACUPUNCTURE (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on SOMA ACUPUNCTURE (group or organization), its agents or employee.

SOMA ACUPUNCTURE (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Michelle Hange-Bauer, Office Mgr. (signature) 3/2/94 (date)

SPECIAL AUTHORIZATION:

EFRESHMENTS: _____ (initials of authorizing authority).
 RES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

Y: BRANCH/MAIN MANAGER: Tobias Angler

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

SFPL-15
 (6/9/92)

Application Date: _____

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Dates Requested: <i>13 April 94</i> | Time Requested: <i>6:30 - 8:30</i> |
| Facility: <i>NVA</i> | Attendance Expected: <i>25-30</i> |
| Describe event or purpose of meeting: <i>Neighborhood Crime watch meeting for the 400 block of Diamond</i> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <i>Neighborhood Crime watch (SAFE)</i> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <i>Organizational meet for 400 block of Diamond St</i> | |
| Primary Contact Person: <i>Jack Dowdy</i> | Position in Group: |
| Full Mailing Address: <i>446 Diamond St 94114</i> | |
| Day Phone: <i>415 648 5035</i> | Evening Phone: <i>415 648 5035</i> |
| Secondary Contact Person: | Position in Group: |
| Full Mailing Address: | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☐. If yes, attach insurance rider.

certify that I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Jack Dowdy (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: _____

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ initials of authorizing authority
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

DOCUMENTS DEPT.

FEB 24 1994

SAN FRANCISCO
 PUBLIC LIBRARY

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 11 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------|--------------------------------|
| Dates Requested: <u>Wed, April 13</u> | Time Requested: <u>7:30-10</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>15</u> |
| Describe event or purpose of meeting: <u>Consumer Education</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Name of Group: <u>CITIZENS FOR HEALTH</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>CONSUMER HEALTH ADVOCACY</u> | |
| Primary Contact Person: <u>JENNIFER LIVELY</u> | Position in Group: <u>CHAPTER COORDINATOR</u> |
| Full Mailing Address: <u>1882 35TH AVE SAN FRANCISCO, CA 94122</u> | |
| Day Phone: <u>(415) 566-9733</u> <u>664-1464</u> <u>W-F</u> | Evening Phone: <u>(415) 566-9733</u> |
| Secondary Contact Person: <u>BOWEN JOHNSON</u> | Position in Group: <u>CHAPTER CO-COORDINATOR</u> |
| Full Mailing Address: <u>2595 43RD AVE #5 SAN FRANCISCO, CA 94116</u> | |
| Day Phone: <u>(415) 665-1362</u> | Evening Phone: <u>(415) 665-1362</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

CITIZENS FOR HEALTH (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the CITIZENS FOR HEALTH (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on CITIZENS FOR HEALTH (group or organization), its agents or employee.

CITIZENS FOR HEALTH (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Bowen C. Johnson (signature) 3/10/94 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Vase

DOCUMENTS DEPT

MAR 10 1994

SAN FRANCISCO
PUBLIC LIBRARY

B-E

SAN FRANCISCO PUBLIC LIBRARY

MAR 16 1994

REQUEST FOR SHORT-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)

LOCATION OF MEETING ROOM:

Community RoomDATE(S): April 14HOURS: 5:15to 6:45

NAME OF ORGANIZATION:

Bernal Elder Support Team

PURPOSE OF ORGANIZATION:

To give assistance to homebound & frail elders in the Bernal Heights neighborhood.

TYPE OF ACTIVITIES planned for library space:

A Volunteer / Staff Meeting

ESTIMATED ATTENDANCE:

10

INDIVIDUAL IN CHARGE of meeting(s) in library space:

NAME:

Carolee Wandschick

OFFICIAL CAPACITY:

Volunteer Coordinator

TELEPHONE NO.:

206-9177

ADDRESS:

301 BocanaSF, CA 94110

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME:

Carmen Medina

TELEPHONE NO.:

206-9177

NAME:

Vicki BHNC

TELEPHONE NO.:

206 2145

OTHER INFORMATION:

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME:

Carolee Wandschick

OFFICIAL CAPACITY:

Volunteer Coordinator

TELEPHONE NO.:

206-9177

ADDRESS:

301 BocanaSF, CA 94110

TODAY'S DATE:

3-15-94

APR 18 1994

SAN FRANCISCO
PUBLIC LIBRARYSAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/16/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

TOSS Ministry Family Support - Sandra Brown
1611 Yosemite Ave #4, San Francisco, CA 94124; TEL. 822-9557
4/7 & 4/19/94: 6:30-9:30PM
Expiration date: 04/20/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3342 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/16/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 5/26/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2,21,28; 4/18,25/94: 8:00-10:00PM

Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/16/94

Page 3

Park Branch

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

Raelian Movement - Felix Clairvoyant
PO Box 60161, Palo Alto, CA 94306; TEL. 306-7725
4/27/94: 7-10 PM
Expiration date: 04/28/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Sri Chinmoy Center - Golapendu Ng
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
Thurs 4/21/94: 6:00-10:00PM
Expiration date: 04/22/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/16/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

EXPIRATION DATE: 12/28/94

APPLICATION FOR USE OF SFPL MEETING ROOM:

NOTE: Complete form 74.3 in duplicate)
and submit to Manager of Requested Facility

| | |
|---------------------------------------------------------------------|---------------------------------------|
| DATE REQUESTED: <u>Sat 3rd Saturday, every month</u> | TIME REQUESTED: <u>2 PM - 5 PM</u> |
| FAC <u>Western Addition Branch</u> | ATTENDANCE EXPECTED: <u>15 +</u> |
| Describe event or purpose of meeting: <u>Membership meetings</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------|--------------------------------------------------------------------------|
| NAME OF GROUP: <u>National Council of Negro Women</u> | Non-Profit: <u>Yes</u> <input type="radio"/> No <input type="radio"/> |
| PURPOSE OF GROUP: <u>Community Service</u> | |
| PERSON APPLYING: <u>Willie B. Kennedy</u> | POSITION IN GROUP: <u>President</u> |
| MAILING ADDRESS: <u>S.F. CA</u> <u>City Hall Rm 235 94102</u> | |
| DAY PHONE: <u>554 - 5734</u> | NIGHT PHONE: |

CATEGORY OF USE: circle all that apply

| | | |
|------------------------------------------|------------|----|
| Library-sponsored event: | Yes | No |
| Government agency: | Yes | No |
| Community-based group: | <u>Yes</u> | No |
| Children/Youth Literacy/Education Group: | Yes | No |
| Other: | | |

CONDITIONS FOR USE:

Insurance required (Yes/No). If yes, attach insurance rider.

I certify I have read the meeting room rules, Indemnification, and Waiver of Liability and agree to all provision of the above:

above (signature)

SPECIAL AUTHORIZATION:

| | | |
|------------------|----------|-----------------------------------|
| REFRESHMENTS: | <u>W</u> | initials of authorizing authority |
| FEE PAID/WAIVED: | | |
| Room rental: | | rec'd/waived by: _____ |
| Key Deposit: | | rec'd/waived by: _____ |
| Janitorial: | | rec'd/waived by: _____ |

☒ APPROVED

☐ DISAPPROVED

☐ ROOM NOT AVAILABLE: ALTERNATE SUGGESTED: _____

by: Branch/Main Manager: Jan S. Jackson

APR 25 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/21/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Youth Program - Lorena Archila
515 Cortland Ave, San Francisco, CA 94110; TEL. 206-2143
Tues 4/26 & Wed 5/4/94: 3-6 PM
Expiration date: 05/05/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/21/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM

Expiration date: 05/27/94

Fiction Writing Workshop - Ralph Howard

2824 Geary #1, San Francisco, CA 94118; TEL. 929-1898

1/31; 2/9; 3/2, 21, 28; 4/18, 25/94: 8:00-10:00PM

Expiration date: 04/26/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/21/94

Page 3

Park Branch

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

Raelian Movement - Felix Clairvoyant
PO Box 60161, Palo Alto, CA 94306; TEL. 306-7725
4/27/94: 7-10 PM
Expiration date: 04/28/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Sri Chinmoy Center - Golapendu Ng
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
Thurs 4/21/94: 6:00-10:00PM
Expiration date: 04/22/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/21/94

Page 4

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 18 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------|--------------------------------|
| Dates Requested: <u>Tues. April 21</u> | Time Requested: <u>6-10</u> |
| Facility: <u>PANEL</u> | Attendance Expected: <u>30</u> |
| Describe event or purpose of meeting: <u>Follow-up Meditation Seminar</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Sri Chinmoy Center</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Meditation group offering intro classes as Community Service</u> | |
| Primary Contact Person: <u>Gopalendu Ng</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>529 Moraga St., SE, CA 94121</u> | |
| Day Phone: <u>552-2443</u> | Evening Phone: <u>665-8626</u> |
| Secondary Contact Person: <u>Charlie Rebich</u> | Position in Group: <u>same as above</u> |
| Full Mailing Address: <u>same as above</u> | |
| Day Phone: <u>same as above</u> | Evening Phone: <u>same as above</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

Sri Chinmoy Center (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Sri Chinmoy Center (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmoy Center (group or organization), its agents or employee.

Sri Chinmoy Center (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room Rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Gopalendu Ng (signature) 3/17/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Ose

2
7-94
SUN JUNIOR BRANCH
SAN FRANCISCO PUBLIC LIBRARY

111
REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: NICARAGUAN CULTURAL CLUB

PURPOSE OF ORGANIZATION: TO PROMOTE THE POSITIVE & BEAUTIFUL NICARAGUAN CULTURE TO THE BAY AREA COMMUNITY

TYPE OF ACTIVITIES taking place in the Library: MEETING TO COORDINATE EVENTS FOR NICARAGUAN CULTURAL DAY AT THE CALIFORNIA ACADEMY OF SCIENCES

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: MARIA C. CHAMORRO

ADDRESS: 291 PARIS ST. #A SF., CA 94112

TELEPHONE: (415) 333-2994

OFFICIAL CAPACITY: REPRESENTATIVE

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: MR. REVATO PEÑA Telephone: (415) 337-8535

NAME: MRS. NORA G. CHAMORRO Telephone: (415) 334-9316

SPACE REQUESTED: THE EXCELSIOR LIBRARY MEETING ROOM.

DATE(S): 04/21/94 Hours: 2:00 to 4:00

APPROXIMATE ATTENDANCE: 20-25 PERSONS.

OTHER INFORMATION: _____

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

approved: *Joan Green*
In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT.

MAY 3 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 17 1994
 SFPL-15
 (5/92)

Application Date: MARCH 18, 1994

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------------------------------|----------------------------------------------------|
| Dates Requested: <u>3RD TUESDAY (MONTHLY)</u> <u>STARTING MARCH, APRIL '94</u> | Time Requested: <u>1:00 PM TO 2:30 PM</u> |
| Facility: <u>Western Addition Branch</u> | Attendance Expected: <u>APPROXIMATELY 18 TO 25</u> |
| Describe event or purpose of meeting: <u>SENIOR CITIZENS MEET TO PLAN RELIGIOUS + SOCIAL EVENTS</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>THE SENIOR CITIZEN CHRISTIAN FELLOWSHIP GROUP</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>MEET TOGETHER TO FELLOWSHIP, PARTICIPATE IN EXERCISE, SOCIAL ACTIVITIES, ART, SINGING, TOUR TRIPS, HEARING RESOURCES AVAILABLE TO SENIORS + HAVE SPIRITUAL LESSONS</u> | |
| Primary Contact Person Applying: <u>MR. DEWITT HUMERY</u> | Position in Group: <u>PRESIDENT</u> |
| Full Mailing Address: <u>111 SWEENEY ST. SF CA 94134</u> | |
| Day Phone: <u>(415) 468-2975</u> | Evening Phone: <u>(415) 468-2975</u> |
| Secondary Contact Person: <u>MRS. ETALKA MITCHELL</u> | Position in Group: <u>VICE-PRESIDENT</u> |
| Full Mailing Address: <u>1583 LASALLE AVE, SF CA 94124</u> | |
| Day Phone: <u>(415) 824-3543</u> | Evening Phone: <u>(415) 824-3543</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒ If yes, attach insurance rider.

I certify I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Dewitt Humery (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: Dec. 20, 1994

DOCUMENTS DEPT.
 MAY 18 1994

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ initials of authorizing authority
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Jan Jackson

SAN FRANCISCO PUBLIC LIBRARY

APR 20 1994

REQUEST FOR SHORT-TERM USE OF LIBRARY MEETING ROOM

(Please type or print)

LOCATION OF MEETING ROOM: Bernal Heights Library

DATE(S): April 26 and May 4 HOURS: 3:00pm to 6:00 pm

NAME OF ORGANIZATION: Bernal Heights Neighborhood Ctr - MYEEP

PURPOSE OF ORGANIZATION: Youth Program

TYPE OF ACTIVITIES planned for library space: meeting

ESTIMATED ATTENDANCE: 25

INDIVIDUAL IN CHARGE of meeting(s) in library space:

NAME: Lorena Archila

OFFICIAL CAPACITY: MYEEP Coordinator

TELEPHONE NO.: 206-2143

ADDRESS: 515 Cortland Ave.
S.F., CA 94110

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Mauricio Vela TELEPHONE NO.: 206-2140

NAME: Raúl Rodriguez TELEPHONE NO.: 206-2140

OTHER INFORMATION: _____

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: _____

OFFICIAL CAPACITY: _____

TELEPHONE NO.: _____

ADDRESS: _____

TODAY'S DATE: _____

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

SFPL-15
 (6/8/92)

Application Date: APRIL 5th 94

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|----------------------------------------------------------------------------------------------------|--------------------------------------|
| Date Requested: <u>April 27</u> | Time Requested: <u>7-10 PM</u> |
| Library: <u>PARK BRANCH</u> | Attendance Expected: <u>10-15</u> |
| Describe the event or purpose of meeting: <u>INFORMATIVE and EDUCATIONAL VIDEO and LECTURE.</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: <u>RAELIAN MOVEMENT</u> | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>EDUCATE ABOUT MOVEMENT / VIDEO and ANSWERING OF QUESTIONS</u> | |
| Primary Contact Person: <u>FELIX CHAIRVOYANT</u> | Position in Group: <u>MAIN ORGANIZER</u> |
| Mailing Address: <u>P.O. BOX 60161, Palo Alto, Ca. 94306-0161</u> | |
| Home Phone: <u>306-7700</u> | Business Phone: <u>856-4055</u> |
| Secondary Contact Person: <u>EVA GLASURE</u> | Position in Group: <u>MEMBER</u> |
| Mailing Address: <u>2560 POLK #3, SAN FRANCISCO, CA. 94109</u> | |
| Home Phone: <u>346-1536</u> | Business Phone: <u>SAME</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒. If yes, attach insurance rider.

I certify that I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Eva K. Glasure (signature)

FOR DEPARTMENT USE ONLY

Reservation Date: _____

SPECIAL AUTHORIZATION:

| | | |
|-------------------------|-----------------------------------------|------------------------|
| FRESHMENTS: | Initials of authorizing authority _____ | _____ |
| RES PAID/WAIVED: | Room rental: \$ _____ | rec'd/waived by: _____ |
| | Key Deposit: \$ _____ | rec'd/waived by: _____ |
| | Janitorial: \$ _____ | rec'd/waived by: _____ |

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: _____

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 APR 12 1994
 SAN FRANCISCO
 PUBLIC LIBRARY

April 6, 1994

FELIX CLAIRVOYANT
RAELIAN MOVEMENT
BOX 60161
LO ALTO, CA 94306-0161
(415) 856-4055


Dear Ruth,

Enclosed please find a flyer explaining the Raelian philosophy. I am fully aware that the UFO phenomenon is very controversial and you may find it to be a provocative issue but the reason is very simple: the population has not been educated on the subject. Moreover, I honestly think that my lectures are very informative in the sense that they bring a lot of intellectual challenge to people and most importantly a new understanding of life and many of its components.

I am grateful to your understanding and hope you will be able to attend.

Until I hear from you, I remain

Sincerely yours,


Felix Clairvoyant
Molecular Biologist

1871
Jan 10
1871

1871

My dear Sir,
I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the matter of the
and in reply to inform you that the same has been forwarded to the proper authorities for their consideration.
I am, Sir, very respectfully,
Your obedient servant,
J. H. [Name]

Very respectfully,
J. H. [Name]

1871

Raelian Seminars

Every year, on every continent, members of the Raelian Movement are able to participate in two weeks of seminars.

On the American continent, the seminars are held in Quebec, starting the third week of July, on a camp-ground where naturism is permitted. In December, the seminar is held near the beaches of Miami, Florida.

To be entitled to this, you need to have read RAELE's books: "The Message Given To Me By Extra-terrestrials", "Let's Welcome Our Fathers From Space" and "Sensual Meditation". Furthermore you will need to be a fully paid-up member of your local Raelian Movement.

Please note that if this is your first seminar, the seminar fee is waived (but does not include food and lodging). This only applies to the Quebec seminars.

The pace at which you wish to progress and develop on your philosophical, emotional and professional levels will be purely up to you. Rael and his assistants will be there to guide and help you.

For more information concerning our seminars, please refer to the list of addresses in this booklet.



Sensual Meditation tape

We are proud to be able to offer you a high quality recorded tape (voice and music) which will enable you to learn this meditation technique. The text and music were composed by Rael himself, and then translated into English. This tape was specially designed for your enjoyment. It will fill your cells with a deep feeling of harmony and peaceful contentment.

Price: \$23.12 Cdn. + \$3.00 for postage and handling.
\$20.00 U.S. + \$2.00 for postage and handling.
(subject to change without notice)

Send your money order to

CANADA:

UNITED STATES:

A.R. 1973 inc.
P.O. Box 296
Boucherville, Quebec
Canada, J4B 5L6

USAR 1973 inc.
P.O. Box 617793
North Miami, FL
USA 33261



The symbol of Infinity



The Star of David represents infinite SPACE. The extra-terrestrials who created mankind in their laboratories have scientifically proven that the infinitely small has the same structure as the infinitely large. The atoms in our hand, for instance, contain minute galaxies which themselves have planets with minute humanities living there. Similarly, our own galaxy is a tiny particle of a huge atom which itself is part of some immense world and this ad infinitum. Hence "as above, so below".



The symbol in the center resembling the shape of our galaxy, represents infinite TIME. Everything in the universe is in perpetual transformation both at the infinitely small and the infinitely large level. Matter has no beginning, nor end. EVERYTHING IS CYCLIC. As Heracles said in 500 BC, "Nothing is created, nothing is lost, everything is transformed".

The symbol of infinity is the emblem of the Raelian Movement, which was founded by the Elohim's last messenger, Rael. Elohim is a plural and as found in the original biblical texts, means "those who came from the sky". The Elohim are those extra-terrestrials who, through the synthesis of DNA, scientifically created mankind in their own image.

UFO

the truth finally revealed

*They created humanity
scientifically in their laboratories,
thanks to DNA*

*Their masterpiece was described
by those ancient men,
who first wrote the Bible.*



*Who are they?
What are they
to humanity?
Why have we been
created?
When will they come?
Where do they want
to meet?*

Raelian Movement

Sensual meditation is the "instruction manual" given to us to teach us how to master the harmonizing possibilities within the brain, by those best placed to know: those who designed the human being. As human beings, we are linked by our receptors, **the senses**, to the infinite which surrounds and composes us.

By developing our **sensuality**, we develop our capacity to feel connected with the infinite and to feel infinite ourselves. Allowing us to get rid of the Judeo-Christian inhibitions of guilt, whilst at the same time not falling into the ethereal mysticism of eastern teachings, **sensual meditation** allows us to discover our bodies and especially to learn how to use them to enjoy sounds, colors, smells, tastes, carresses and particularly a sexuality felt with all of our senses.

The Elohim taught these techniques of sensual meditation to **Rael** so that we can awaken our mind by awakening our body and realize our true potential.

The word meditate comes from the latin "meditare" which means to exercise. It refers to the exercising of our senses which are linked to the brain via the nervous system. **Awakening our senses awakens our mind.**

Sensual Meditation **book**



Throughout time, teachings have attempted to achieve the blossoming of the mind, while detrimentally neglecting the body. Sensual meditation is unique in its respect for the indivisible nature of the human being.

In this book you will discover some of the most effective techniques for awakening your mind and body. This will enable you to understand and use to the fullest the powers of your mind which are already within you.

**Price: \$12.84 CDN + \$3.00 for postage and handling.
\$11.00 US + \$2.00 for postage and handling.**

(subject to change without notice)

If you wish to receive information on the Raelian Movement's activities, monthly meetings, or to have a free video presentation about the ELIHILL'S messages given to Rael, please contact:

Canada

USA

Branch office:

CANADIAN RAEILIAN MOVEMENT

P.O. Box 86, Youville Station

Montreal QC Canada H2P 2V2

514.681.6263

Fax: 514.686.4902

Branch offices:

P.O. Box 56, Station "D"

Toronto, ON M6P 3J5

416.769.1358

P.O. Box 4386

Vancouver, BC V6B 3Z8

604.681.9954

C.P. 20333

Ottawa, ON K1N 9N5

613.585.7004

UNITED STATES

Head office:

UNITED STATES RAEILIAN MOVEMENT

P.O. Box 611793

North Miami, FL USA 33261

305.273.0553

Branch offices:

P.O. Box 981216

San Diego, CA

USA 90066

310.398.5024

P.O. Box 70606

Las Vegas NV

USA 89170

702.733.0806

P.O. Box 60161

Palo Alto CA

USA 94306-0161

415.856.4055

P.O. Box 3178

Athens GA

USA 30612-1178

404.369.8067

ENGLAND

BRITISH RAEILIAN MOVEMENT

BCM Ministrel

London WC1N 3XX

272.23.74.47

Monthly gatherings

Principal cities

Montreal

Third Sunday of each month (except July)

Holiday Inn Crowne Plaza

420 Sherbrooke West, Montreal

10:00 AM

Toronto

Second Sunday of each month (except July)

Omega Centre

29 Yorkville Ave, Toronto

10:00 AM

Vancouver

Third Sunday of each month (except July)

121, 10th Street #903

New Westminster

10:00 AM

Miami

First Sunday of each month (except April and August)

Educating Hands

261 S.W. 8th Street, Miami

10:00 AM

Los Angeles

First Sunday of each month (except July)

11916 Louise Ave, Los Angeles

10:00 AM

SF
893
4/28/94
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SAN FRANCISCO PUBLIC LIBRARY

APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/28/94

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Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Youth Program - Lorena Archila
515 Cortland Ave, San Francisco, CA 94110; TEL. 206-2143
Tues 4/26 & Wed 5/4/94: 3-6 PM
Expiration date: 05/05/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 4/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/28/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

San Francisco Amateur Astronomers - Barry Hirrell

511 Clipper St, San Francisco, CA 94114; TEL. D 986-2601/E 282-3759

4th Wednesdays: 6:00-8:45PM

Expiration date: 04/30/94

Park Branch

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

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628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM

Expiration date: 05/27/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

Hayden for Governor - Donna Gouse

1435 Waller St #2, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

5/9, 5/16, 5/23/94: 7 PM

Expiration date: 05/24/94

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/28/94

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Park Branch

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7:00-9:00PM
Expiration date: 05/31/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/13, 6/20 & 6/27: 7-10 PM
Expiration date: 06/28/94

Sri Chinmoy Meditation Group - Bitapi Solomon
2028 Taraval St #5, San Francisco, CA 94116; TEL. D 621-1994/E 681-3564
Tues 5/3 & 5/10; Thurs 5/19 & 5/26/94: 7:30-9 PM
Expiration date: 05/27/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

Legal Rights Group - Steve Patapoft
1222 - 24th Ave, San Francisco, CA 94122; TEL. 664-8068
5/5/94: 6-8 PM
Expiration date: 05/06/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

04/28/94

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Potrero Branch

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

SFPL-15
 (6/89/92)

Application Date: APRIL 5th - 94

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------------------------|-------------------------------------|
| Date Requested: <u>April 27 - April 28</u> | Time Requested: <u>7-10 PM</u> |
| Facility: <u>PARK BRANCH</u> | Attendees Expected: <u>10-15</u> |
| Describe event or purpose of meeting: <u>INFORMATIVE and EDUCATIONAL VIDEO and LECTURE</u> | |

INFORMATION ON REQUESTING ORGANIZATION

| | |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Name of Group: <u>RAELIAN MOVEMENT</u> | Non-Profit: <u>Yes <input type="radio"/> No <input checked="" type="radio"/></u> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>TO EDUCATE ABOUT MOVEMENT / VIDEO and ANSWERING OF QUESTIONS</u> | |
| Primary Contact Person: <u>FELIX CBAIRVOYANT</u> | Position in Group: <u>MAIN ORGANIZER</u> |
| Full Mailing Address: <u>P.O. Box 60161, Palo Alto, CA 94306-0161</u> | |
| Day Phone: <u>306-7725</u> | Evening Phone: <u>856-4055</u> |
| Secondary Contact Person: <u>EVA GLASURE</u> | Position in Group: <u>MEMBER</u> |
| Full Mailing Address: <u>2560 POLK #3, SAN FRANCISCO, CA 94109</u> | |
| Day Phone: <u>346-1536</u> | Evening Phone: <u>SAME</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒. If yes, attach insurance rider.

I certify that I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Eva K. Glasure (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: April 29, 1994

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ Initials of authorizing authority _____

FEES PAID/WAIVED: Rooms rental: \$ _____ rec'd/waived by: _____

Key Deposit: \$ _____ rec'd/waived by: _____

Janitorial: \$ _____ rec'd/waived by: _____

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 APR 26 1994
 SAN FRANCISCO
 PUBLIC LIBRARY

Approved ☐ Disapproved ☐ Rooms Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Case

Jane Hudson
B/S/D

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

APR 21 1994

(Adopted 9/15/92)

Expiration Date: May 27, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------|--------------------------------------------|
| Date Requested: <u>Tues. May 3 + May 10, Thurs May 19 + 26</u> | Time Requested: <u>7:30 - 9pm</u> |
| Facility: PARK | Attendance Expected: <u>6-15 people</u> |
| Describe event or purpose of meeting: <u>Meditation classes</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: <u>Sri Chinmoy Meditation Group</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>See above</u> | |
| Primary Contact Person: <u>Bitapi Solomon</u> | Position in Group: |
| Full Mailing Address: <u>2028 Taraval St #5 SF CA 94116</u> | |
| Day Phone: <u>621 1994</u> | Evening Phone: <u>681 3564</u> |
| Secondary Contact Person: <u>Maki Shewalter</u> | Position in Group: |
| Full Mailing Address: <u>1298 Market St SF CA 94102</u> | |
| Day Phone: <u>621-1994</u> | Evening Phone: <u>Same</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Sri Chinmoy Meditation (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Sri Chinmoy Meditation (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmoy Meditation (group or organization), its agents or employee.

Sri Chinmoy Meditation (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Bitapi Solomon (signature) April 20 1994 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Patt S. Jose **APR 26 1994**
 SAN FRANCISCO
 PUBLIC LIBRARY



SAN FRANCISCO PUBLIC LIBRARY

APR 28 1994

REQUEST FOR SHORT-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)

LOCATION OF MEETING ROOM: Bernal Heights library

DATE(S): May 4, 1994 HOURS: 7 6:30 to 8:30

NAME OF ORGANIZATION: Friends of the Urban Forest

PURPOSE OF ORGANIZATION: Planting trees in San Francisco

TYPE OF ACTIVITIES planned for library space: Meeting to organize
Bernal Heights tree planting

ESTIMATED ATTENDANCE: 15-25

INDIVIDUAL IN CHARGE of meeting(s) in library space:

NAME: Rosana Francescato

OFFICIAL CAPACITY: volunteer

TELEPHONE NO.: 550-8308 or 477-4541 (work)

ADDRESS: 455 Banks St.
SF, CA 94110

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Mel TELEPHONE NO.: 543-5000

NAME: Leah TELEPHONE NO.: 543-5000

OTHER INFORMATION: We'll want to use a
screen for slides. Thanks!

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: Rosana Francescato

OFFICIAL CAPACITY: volunteer for Friends of Urban Forest

TELEPHONE NO.: 550-8308

ADDRESS: 455 Banks
SF, CA 94110

TODAY'S DATE: 4-27-94

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SAN FRANCISCO
PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------|---------------------------|
| Dates Requested: May 5th, 1994 | Time Requested: 6PM - 8PM |
| Facility: Potrero Hill Library | Attendance Expected: 8 |
| Describe event or purpose of meeting: | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: Legal Rights Group | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Minority legal rights discussion | |
| Primary Contact Person: Steve Poteroff | Position in Group: Member |
| Full Mailing Address: 1222 24th Ave San Francisco, CA 94122 | |
| Day Phone: (415) 664-8018 | Evening Phone: x x |
| Secondary Contact Person: | Position in Group: |
| Full Mailing Address: | |
| Day Phone: | Evening Phone: |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Legal Rights Group (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Legal Rights Group (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Legal Rights Group (group or organization), its agents or employee.

Legal Rights Group (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

[Signature] (signature) 4/26/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

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APR 28 1994

BY: BRANCH/MAIN MANAGER: Tobin KnightSAN FRANCISCO
PUBLIC LIBRARY



SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 4 1994
(Adopted 9/15/92)

Expiration Date: November 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Dates Requested: 1994: 5/5, 7/14, 9/1, 11/3 | Time Requested: Thursdays 2:30 P.M. |
| Facility: Presidio/Library for the Blind & Print Handicapped | Attendance Expected: 9 |
| Describe event or purpose of meeting: Bi-monthly meetings for the Advisory Committee of the Library for the Blind & Print Handicapped | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------|
| Name of Group: Library for the Blind & Print Handicapped | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Advises LBPH Manager about patron concerns & interests related to library service | | |
| Primary Contact Person: Elizabeth Heidhues | Position in Group: President | |
| Full Mailing Address: 566 40th Ave. S.F. 94121 | | |
| Day Phone: 752-0471 | Evening Phone: SAME | |
| Secondary Contact Person: Arlene Doherty | Position in Group: vice-President | |
| Full Mailing Address: 4515 Ulloa St. S.F. 94116 | | |
| Day Phone: 681-3462 | Evening Phone: SAME | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

(identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on (group or organization), its agents or employee.

(identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Elizabeth A. Heidhues (signature) March 3, 1994 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: (initials of authorizing authority).
FEES PAID/WAIVED: Room rental: \$ rec'd/waived by: _____
Key Deposit: \$ rec'd/waived by: _____
Janitorial: \$ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Master Magid

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PUBLIC LIBRARY



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY - 7 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|----------------------------------------------------------------------------------------------------------|--------------------------------|
| Dates Requested: MAY 5 THURS | Time Requested: 6-9 |
| Facility: BAYVIEW- WADEN #13 | Attendance Expected: 50 |
| Describe event or purpose of meeting: DISCUSS COMMUNITY DEATH OF ALEXIUS MCNEAL - PROBLEM SOLVING | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: ANGELA ALIOTO & COMMUNITY | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: MEETING ABOUT HOOD PROBLEMS / DEATH OF ALEXIUS MCNEAL | |
| Primary Contact Person: Patty Pink (REG) | Position in Group: REG Aid to Ms. ALIOTO |
| Full Mailing Address: POB 94188 | |
| Day Phone: 822-8266 | Evening Phone: _____ |
| Secondary Contact Person: Reg (Alioto's Office) | Position in Group: _____ |
| Full Mailing Address: _____ | |
| Day Phone: _____ | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

_____ (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the _____ (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on _____ (group or organization), its agents or employee.

_____ (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Patty Pink (signature) 4-29-94 (date).

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| REFRESHMENTS: _____ (initials of authorizing authority). | | SPECIAL AUTHORIZATION: | |
| FEE PAID/WAIVED: | Room rental: \$ _____ | rec'd/waived by: _____ | <div align="right">DOCUMENTS DEPT</div> <div align="center">MAY 3 1994</div> <div align="right">SAN FRANCISCO PUBLIC LIBRARY</div> |
| | Key Deposit: \$ _____ | rec'd/waived by: _____ | |
| | Janitorial: \$ _____ | rec'd/waived by: _____ | |
| <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Room Not Available: Alternate Suggested: _____ | | | |
| BY: BRANCH/MAIN MANAGER: <u>Catherine M. Bremer</u> | | | |

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAR 4 1994 *Advised 2/15/92*

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Dates Requested: <u>Thurs. May 5 and Thurs. Aug 4</u> | Time Requested: <u>7:00 pm to 9:00 pm</u> |
| Facility: <u>Park Branch Library Mtg. Room</u> | Attendance Expected: <u>50</u> |
| Describe event or purpose of meeting: <u>Quarterly Police Community Relations Meetings</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------|
| Name of Group: <u>Park Police District Community Relations Mtg.</u> | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Exchange information between Police & Citizenry</u> | | |
| Primary Contact Person: <u>Michael Gannon</u> | | Position in Group: <u>Comm. Relations coordinator</u> |
| Full Mailing Address: <u>Park Police Station, Stanyan & Waller Sts. San Francisco, CA 94117</u> | | |
| Day Phone: <u>553-1061</u> | Evening Phone: <u>753-7292</u> | |
| Secondary Contact Person: <u>Captain Robert Berry</u> | | Position in Group: <u>Chair</u> |
| Full Mailing Address: <u>Park Police Station, Stanyan & Waller Sts. San Francisco, CA 94117</u> | | |
| Day Phone: <u>553-1065</u> | Evening Phone: <u>553-1061</u> | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Park Police Station (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Park Police Station (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Park Police Station (group or organization), its agents or employee.

Park Police Station (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Robert J. Berry (signature) 3/3/94 (date)
 ROBERT J. BERRY
 CAPTAIN

REFRESHMENTS: RV (initials of authorizing authority)
SPECIAL AUTHORIZATION:

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Roll S. Wade

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MAR 3 1994

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MAY 9 1994

SAN FRANCISCO
PUBLIC LIBRARY**SAN FRANCISCO PUBLIC LIBRARY**
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/06/94

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Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
6/1/94: 6-8 PM
Expiration date: 06/02/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/06/94

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Excelsior Branch

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Neighborhood Safe Group - Pamela Matsuda
SAFE, , CA ; TEL. 564-SAFE
5/18/94: 7-8:45 PM
Expiration date: 05/19/94

Noe Valley Branch

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

Park Branch

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Tues 5/17 & 6/21/94: 7:30-10:00PM
Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM
Expiration date: 05/27/94

Friends of the Urban Forest - Kathleen Zierolf
501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494
6/23/94: 7 PM
Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/06/94

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Park Branch

Haight Ashbury Service Association - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
3rd Thursdays: 1:00PM
Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising
952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025
Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM
Expiration date: 06/01/94

Haight Street Merchants - Bill Hoover
1400 Haight St, San Francisco, CA 94117; TEL. D 255-1180/E 648-3174
5/18/94: 7 PM
Expiration date: 05/19/94

Hayden for Governor - Donna Gouse
1435 Waller St #2, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
5/9, 5/16, 5/23/94: 7 PM
Expiration date: 05/24/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7-9 PM
Expiration date: 11/08/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/13, 6/20 & 6/27: 7-10 PM
Expiration date: 06/28/94

Sri Chinmoy Meditation Group - Bitapi Solomon
2028 Taraval St #5, San Francisco, CA 94116; TEL. D 621-1994/E 681-3564
Tues 5/3 & 5/10; Thurs 5/19 & 5/26/94: 7:30-9 PM
Expiration date: 05/27/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/06/94

Page 4

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/06/94

Page 5

Western Addition Branch

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94



EXPIRATION DATE: 6/28/94

APPLICATION FOR USE OF SFPL MEETING ROOM:

Note: Complete form 74.3 in duplicate)
and submit to Manager of Requested Facility

| | |
|--------------------------------------------------------------------------------------------------------------|--------------------|
| DATES REQUESTED: May 7, 1994 1st Saturday monthly June 4 1994 | REQUESTED: 1-4 pm |
| FACILITY: USA meeting room | DANCE EXPECTED: 20 |
| Describe event or purpose of meeting: SFERO Esperanto Monthly program of the San Francisco Regional orgn. | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| NAME OF GROUP: San Francisco Esperanto Regional Organization | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| PURPOSE OF GROUP: Hospitality to foreign Esperantists To teach and practice speaking Esperanto | |
| PERSON APPLYING: Charles E. Galvin, Jr. | POSITION IN GROUP: President |
| MAILING ADDRESS: 121 Cortland Ave SF 94110 | |
| DAY PHONE: 397-5517 | NIGHT PHONE: 821-9783 |

CATEGORY OF USE: circle all that apply

| | | |
|------------------------------------------|------------|----|
| Library-sponsored event: | Yes | No |
| Government agency: | Yes | No |
| Community-based group: | <u>Yes</u> | No |
| Children/Youth Literacy/Education Group: | Yes | No |
| Other: | | |

CONDITIONS FOR USE:

Insurance required (Yes/No) No If yes, attach insurance rider.

I certify I have read the meeting room rules, Indemnification, and Waiver of Liability and agree to all provision of the above:

Charles Galvin
 (signature)

SPECIAL AUTHORIZATION:

| | | |
|------------------|-------|-----------------------------------|
| REFRESHMENTS: | _____ | initials of authorizing authority |
| FEE PAID/WAIVED: | _____ | |
| Room rental: | _____ | rec'd/waived by: _____ |
| Key Deposit: | _____ | rec'd/waived by: _____ |
| Janitorial: | _____ | rec'd/waived by: _____ |

X APPROVED

_____ DISAPPROVED

_____ ROOM NOT AVAILABLE: ALTERNATE SUGGESTED: _____

by: Branch/Main Manager: Joan Jackson

DOCUMENTS DEPT.

JUN 28 1994

SAN FRANCISCO PUBLIC LIBRARY



121 Cortland Avenue
San Francisco, California 94110-5503
U.S.A. • Usono
☎ +1 (415) 821-9783

Charles E. Galvin, Jr.

1993-11-22

San Francisco Public Library
Western Addition Branch
Attention: Ms. Jackson
1550 Scott Street
San Francisco CA 94115

Dear Ms. Jackson:

I am writing to thank you for providing meeting space to the San Francisco Esperanto Regional Organization (SFERO). We appreciate the support of the Library, and we hope that we may continue to use the meeting room in the Spring.

We would like to use the meeting room on February 5, May 7, and June 4, 1994 (each a Saturday, from 1:30 - 3:00 pm).

Please let me or Cathy Schulze (415-342-1796) know if you need any additional information.

Sincerely,



Charles E. Galvin, Jr.
(President, SFERO)

SF
75
31a
-25-94

**SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS**

APR 25 1994
(Adopted 9/15/92)

Expiration Date: May 24, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| Dates Requested: <u>May 9, 16, 23</u> | Time Requested: <u>7:00 pm</u> |
| Facility: PARK | Attendance Expected: <u>15-20</u> |
| Describe event or purpose of meeting: <u>To organize Hayden for Governor campaign volunteers in San Francisco</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|-------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Hayden for Governor</u> | | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Organizing meetings</u> | | |
| Primary Contact Person: <u>Donna Gouse</u> | Position in Group: <u>Volunteer</u> | |
| Full Mailing Address: <u>1435 Waller St. #2 San Francisco 94117</u> | | |
| Day Phone: <u>621-9553</u> | Evening Phone: <u>564-8757</u> | |
| Secondary Contact Person: <u>Neville Stockton</u> | | Position in Group: <u>SF Coordinator</u> |
| Full Mailing Address: <u>2377 San Jose Blvd. San Francisco 94112</u> | | |
| Day Phone: <u>337-5550</u> | Evening Phone: <u>337-5550</u> | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Hayden for Governor (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Hayden for Governor (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Hayden for Governor (group or organization), its agents or employee.

Hayden for Governor (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Donna Gouse (signature) 4/21/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

| | |
|-----------------------|------------------------|
| FEES PAID/WAIVED: | DOCUMENTS DEPT. |
| Room rental: \$ _____ | rec'd/waived by: _____ |
| Key Deposit: \$ _____ | rec'd/waived by: _____ |
| Janitorial: \$ _____ | rec'd/waived by: _____ |

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Vose

APR 28 1994
SAN FRANCISCO
PUBLIC LIBRARY



MAY 16 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/13/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
6/1/94: 6-8 PM
Expiration date: 06/02/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/13/94

Page 2

Excelsior Branch

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Neighborhood Safe Group - Pamela Matsuda
SAFE, , CA ; TEL. 564-SAFE
5/18/94: 7-8:45 PM
Expiration date: 05/19/94

Neighborhood of the Excelsior McLaren Task Force - Jo Coffey
248 Dublin, San Francisco, CA 94112; TEL. 585-6505
6/15/94: 6:30-8:45 PM
Expiration date: 06/16/94

Noe Valley Branch

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

Park Branch

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Tues 5/17 & 6/21/94: 7:30-10:00PM
Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM
Expiration date: 05/27/94

Friends of the Urban Forest - Kathleen Zierolf
501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494
6/23/94: 7 PM
Expiration date: 06/24/94

THE HISTORY OF THE CITY OF BOSTON

By

JOSEPH NEASE

Author of "The History of the City of New York"

From the Original Manuscript by

JOSEPH NEASE

JOSEPH NEASE

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/13/94

Page 3

Park Branch

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

Haight Street Merchants - Bill Hoover

1400 Haight St, San Francisco, CA 94117; TEL. D 255-1180/E 648-3174

5/18/94: 7 PM

Expiration date: 05/19/94

Hayden for Governor - Donna Gouse

1435 Waller St #2, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

5/9, 5/16, 5/23/94: 7 PM

Expiration date: 05/24/94

Park Police District Community Relations Mtg. - Michael Gannon

Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7

Thurs 5/5 & 8/4/94: 7:00-9:00PM

Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed

1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41

1st Mondays: 7-9 PM

Expiration date: 11/08/94

Sri Chinmoy Center - Charlie Rebich

529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626

6/13, 6/20 & 6/27: 7-10 PM

Expiration date: 06/28/94

THE HISTORY OF THE UNITED STATES

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SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/13/94

Page 4

Park Branch

Sri Chinmoy Meditation Group - Bitapi Solomon
2028 Taraval St #5, San Francisco, CA 94116; TEL. D 621-1994/E 681-3564
Tues 5/3 & 5/10; Thurs 5/19 & 5/26/94: 7:30-9 PM
Expiration date: 05/27/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Polsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/13/94

Page 5

Western Addition Branch

National Council of Negro Women - Willie Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734

3rd Saturdays: 2:00-5:00PM

Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye

2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587

2nd Wednesdays: 7:00-8:45PM

Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.

121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783

Sat 5/7 & 6/4/94: 1:00-4:00PM

Expiration date: 06/28/94

THE JOURNAL OF THE ROYAL ANTHROPOLOGICAL INSTITUTE

Vol. 100

2000

Part 1: The Journal of the Royal Anthropological Institute

Part 2: The Journal of the Royal Anthropological Institute

Part 3: The Journal of the Royal Anthropological Institute

Part 4: The Journal of the Royal Anthropological Institute

Part 5: The Journal of the Royal Anthropological Institute

Part 6: The Journal of the Royal Anthropological Institute

Part 7: The Journal of the Royal Anthropological Institute

Part 8: The Journal of the Royal Anthropological Institute

Part 9: The Journal of the Royal Anthropological Institute

Part 10: The Journal of the Royal Anthropological Institute

Part 11: The Journal of the Royal Anthropological Institute

Part 12: The Journal of the Royal Anthropological Institute

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81a
24-94

EXCISE BRANCH
SAN FRANCISCO PUBLIC LIBRARY

FEB 24 1994

REQUEST FOR USE OF PUBLIC MEETING ROOMS

EXP. 6/94

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: INTERNATIONAL TRAINING IN COMMUNICATION

PURPOSE OF ORGANIZATION: TO DEVELOP AND IMPROVE SPEAKING AND COMMUNICATION SKILLS

TYPE OF ACTIVITIES taking place in the Library: INDIVIDUALS PRACTICE VARIOUS ASPECTS OF PUBLIC SPEAKING

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: DAVID GORE

ADDRESS: 875-25TH AVE., SF 94121

TELEPHONE: HT: 415-752-6190 W: 415-255-3719

OFFICIAL CAPACITY: PRESIDENT, GOLDEN GATE CLUB

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: DAVID GORE

HT: 415-752-6190
Telephone: W: 415-255-3719

NAME: GEORGIA YOUNG

Telephone: 415-333-4954

SPACE REQUESTED: MEETING ROOM

DATE(S): 3/12, 4/9, 5/14, 6/11, 7/9, 8/13 Hours: 12:00 NOON to 4:00 P.M.

APPROXIMATE ATTENDANCE: 8

OTHER INFORMATION: _____

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

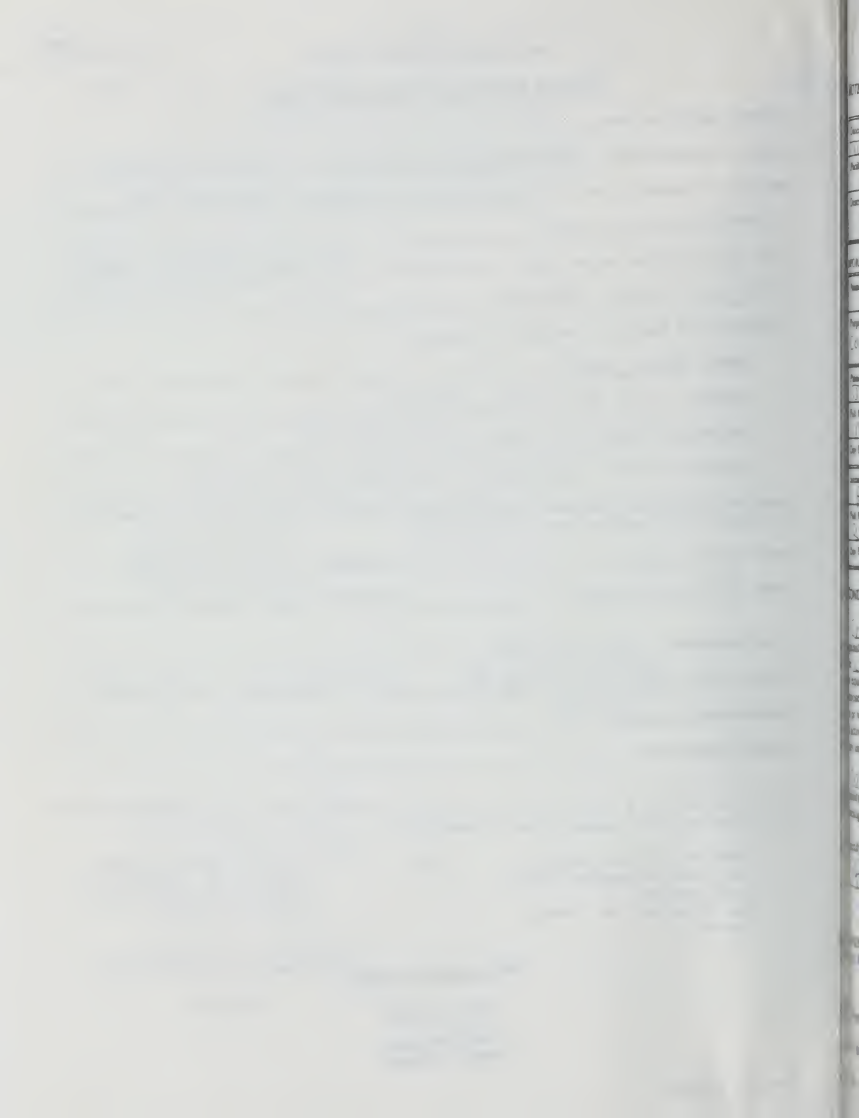
For further information on
Branch meeting facilities call:

DOCUMENTS DEPT.

FEB 28 1994

SAN FRANCISCO
PUBLIC LIBRARY

558-3602



SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING

MAR 25 1994

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------|--------------------------------|
| Date Requested: <u>Thursday, May 17 and 6/21</u> | Time Requested: <u>7:30-10</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>15</u> |
| Describe event or purpose of meeting: <u>Consumer Education</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: <u>CITIZENS FOR HEALTH</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>CONSUMER HEALTH ADVOCACY</u> | |
| Primary Contact Person: <u>JENNIFER LIVELY</u> | Position in Group: <u>CHAPTER COORDINATOR</u> |
| Full Mailing Address: <u>1882 35TH AVE SAN FRANCISCO, CA 94132</u> | |
| Day Phone: <u>(415) 564-9733</u> <u>664-1464</u> <u>W-F</u> | Evening Phone: <u>(415) 566-9733</u> |
| Secondary Contact Person: <u>BOWEN JOHNSON</u> | Position in Group: <u>CHAPTER CO-COORDINATOR</u> |
| Full Mailing Address: <u>2595 43RD AVE #5 SAN FRANCISCO, CA 94116</u> | |
| Day Phone: <u>(415) 665-1362</u> | Evening Phone: <u>(415) 665-1362</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

CITIZENS FOR HEALTH (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of CITIZENS FOR HEALTH (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on CITIZENS FOR HEALTH (group or organization), its agents or employee.

CITIZENS FOR HEALTH (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Bowen C. Johnson (signature) 3/10/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/VAIUED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

Y: BRANCH/MAIN MANAGER: Ruth S. Vose

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY - 3 1994
 1 adopted 9/15/92

Expiration Date: 5/19/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-------------------------------------------------------------------------------------|-----------------------------------|
| Date Requested: <u>5/18/94</u> | Time Requested: <u>7:00 PM.</u> |
| Facility: <u>PART</u> | Attendance Expected: <u>35-40</u> |
| Describe event or purpose of meeting: <u>meetings of Haeght Street merchants</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Haeght Street Merchants</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>talk about issues of concern to people doing business in Haeght St.</u> | |
| Primary Contact Person: <u>Bill Hoover</u> | Position in Group: <u>president</u> |
| Full Mailing Address: <u>Haeght 1400 Haeght St (Gallery of Jewels)</u> | |
| Day Phone: <u>255-1180</u> | Evening Phone: <u>648-3124</u> |
| Secondary Contact Person: <u>Judith Silman</u> | Position in Group: <u>on board of director</u> |
| Full Mailing Address: <u>1408 Haeght St SE Ca 94117</u> | |
| Day Phone: <u>863-2837</u> | Evening Phone: <u>863-3148</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

1. Street Merchants (Identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the H.S.M. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on H.S.M. (group or organization), its agents or employee.

H.S. Merchants (Identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Judith Silman (signature) 5/12/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Reed S. Wore

APR 28 1994

10 EXCELSIOR BRANCH
SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: NEIGHBORHOOD SAFE GROUP

PURPOSE OF ORGANIZATION: NEIGHBORHOOD CRIME WATCH

TYPE OF ACTIVITIES taking place in the Library: MEETING OF NEIGHBORS
ON 200 BLOCK OF LISBON W/ REP. FROM SAFE

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: ~~JEANNIE WONG~~ PAMELA MATSUDA

ADDRESS: SAFE

TELEPHONE: 584-~~14~~ SAFE

OFFICIAL CAPACITY: FACILITATOR / REPRESENTATIVE / ADVISOR

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: Jeannie Wong Telephone: 954-0374

NAME: Tom Sullivan Telephone: 585-2666

SPACE REQUESTED: MEETING ROOM

DATE(S): 5/18 Hours: 7:00 to 8:45

APPROXIMATE ATTENDANCE: 10

OTHER INFORMATION: _____

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602

DOCUMENTS DEPT.

MAY 2 1994

SAN FRANCISCO
PUBLIC LIBRARY

My dear Sir,

I have the honor to acknowledge the receipt of your letter of the 14th inst. in relation to the matter of the

and in reply to inform you that the same has been forwarded to the proper authorities for their consideration.

I am, Sir, very respectfully,
Your obedient servant,
J. H. [Name]

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/19/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

True Life Productions - Darryl Larkins
1427 Underwood Ave, San Francisco, CA 94124; TEL. 822-1625
Wed 4/6 & 5/25/94: 7:00-8:45PM
Expiration date: 05/26/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
6/1/94: 6-8 PM
Expiration date: 06/02/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/19/94

Page 2

Excelsior Branch

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Neighborhood of the Excelsior McLaren Task Force - Jo Coffey
248 Dublin, San Francisco, CA 94112; TEL. 585-6505
6/15/94: 6:30-8:45 PM
Expiration date: 06/16/94

Noe Valley Branch

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

Park Branch

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Tues 5/17 & 6/21/94: 7:30-10:00PM
Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM
Expiration date: 05/27/94

Friends of the Urban Forest - Kathleen Zierolf
501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494
6/23/94: 7 PM
Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/19/94

Page 3

Park Branch

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising

952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025

Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM

Expiration date: 06/01/94

Hayden for Governor - Donna Gouse

1435 Waller St #2, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

5/9, 5/16, 5/23/94: 7 PM

Expiration date: 05/24/94

Park Police District Community Relations Mtg. - Michael Gannon

Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7

Thurs 5/5 & 8/4/94: 7:00-9:00PM

Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed

1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41

1st Mondays: 7-9 PM

Expiration date: 11/08/94

Sri Chinmoy Center - Charlie Rebich

529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626

6/13, 6/20 & 6/27: 7-10 PM

Expiration date: 06/28/94

Sri Chinmoy Meditation Group - Bitapi Solomon

2028 Taraval St #5, San Francisco, CA 94116; TEL. D 621-1994/E 681-3564

Tues 5/3 & 5/10; Thurs 5/19 & 5/26/94: 7:30-9 PM

Expiration date: 05/27/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn

1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924

1st Saturdays: 1:00-6:00PM

Expiration date: 09/30/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/19/94

Page 4

Potrero Branch

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi
1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553
2nd & 4th Thursdays monthly: 1-3 PM
Expiration date: 11/10/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/19/94

Page 5

Western Addition Branch

Kids & Chocolate, Inc. - Laura Spear

POB 24228, San Francisco, CA 94124; TEL. D 546-4949/E 563-3399

5/21/94: 12:30-1:45 PM

Expiration date: 05/22/94

National Council of Negro Women - Willie Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734

3rd Saturdays: 2:00-5:00PM

Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye

2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587

2nd Wednesdays: 7:00-8:45PM

Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.

121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783

Sat 5/7 & 6/4/94: 1:00-4:00PM

Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery

111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975

3rd Tuesdays monthly, starting April '94: 1-2:30 PM

Expiration date: 12/20/94

MAY 17 1994

SFPL-15

(5/92)

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

Application Date: 5/14/94

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|---------------------------------------------------------------------------------|-------------------------------------|
| Dates Requested: <u>5/21/94</u> | Time Requested: <u>1230p - 145p</u> |
| Facility: <u>Western Addition Branch</u> | Attendance Expected: <u>25</u> |
| Describe event or purpose of meeting: <u>informational regarding program</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Kids & Chocolate, Inc.</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>meeting</u> | |
| Primary Contact Person Applying: <u>Laura Spear</u> | Position in Group: <u>Executive Director</u> |
| Full Mailing Address: <u>PO Box 24228, SF CA 94124</u> | |
| Day Phone: <u>415-546-4949</u> | Evening Phone: <u>415-563-3399</u> |
| Secondary Contact Person: <u>Rafiq Wadi</u> | Position in Group: <u>President</u> |
| Full Mailing Address: <u>PO Box 24228, SF CA 94124</u> | |
| Day Phone: <u>415-546-4949</u> | Evening Phone: <u>415-560-2800</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☐. If yes, attach insurance rider.

I certify I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

Laura Spear (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: 5/22/94

DOCUMENTS DEPT.

MAY 18 1994

SPECIAL AUTHORIZATION:

SAN FRANCISCO
PUBLIC LIBRARY

REFRESHMENTS: _____ initials of authorizing authority

| | |
|-----------------------------------------|------------------------|
| FEES PAID/WAIVED: Room rental: \$ _____ | rec'd/waived by: _____ |
| Key Deposit: \$ _____ | rec'd/waived by: _____ |
| Janitorial: \$ _____ | rec'd/waived by: _____ |

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Joan Jackson

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

APR 28 1992
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------------|-------------------------------------------|
| Dates Requested: <u>MAY 21st - 28th each 3rd Saturday monthly</u> | Time Requested: <u>1:30 pm to 5:00 pm</u> |
| Facility: <u>National Health Federation San Francisco Branch</u> | Attendance Expected: <u>20-30 persons</u> |
| Describe event or purpose of meeting: <u>meetings to discuss Alternative Therapies For Health</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>National Health Federation -</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>meetings to discuss Alternative Therapies For Health</u> | |
| Primary Contact Person: <u>Shirley Potasz</u> | Position in Group: <u>Director</u> |
| Full Mailing Address: <u>1330 S. Hooper - Foster City CA. 94404</u> | |
| Day Phone: <u>341-0548</u> | Evening Phone: <u>341-0548</u> |
| Secondary Contact Person: <u>Ruth L. Brown-Allen</u> | Position in Group: <u>Co-ordinator</u> |
| Full Mailing Address: <u>784 Oak Kansas Street - S.F. Ca 94107</u> | |
| Day Phone: <u>415-648-5033</u> | Evening Phone: <u>648-5033</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

_____ (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the _____ (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on _____ (group or organization), its agents or employee.

_____ (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Ruth L. Brown-Allen (signature) April 18 1994 (date)

SPECIAL AUTHORIZATION:
 REFRESHMENTS: _____ (initials of authorizing authority).

FEEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Janet [unclear] *No admission may be charged, nor donations taken or accepted.*

DOCUMENTS DEPT.

MAY 2 1994

MAY 27 1994

SAN FRANCISCO
PUBLIC LIBRARYSAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/26/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
6/1/94: 6-8 PM
Expiration date: 06/02/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/26/94

Page 2

Excelsior Branch

Neighborhood of the Excelsior McLaren Task Force - Jo Coffey
248 Dublin, San Francisco, CA 94112; TEL. 585-6505
6/15/94: 6:30-8:45 PM
Expiration date: 06/16/94

Noe Valley Branch

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

Park Branch

"Sonn KaRa" Performance Art Salon - Ron Leeson
224 Hugo St, San Francisco, CA 94122; TEL. 566-4631
6/16 & 6/30/94: 7-10 PM
Expiration date: 07/01/94

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Tues 5/17 & 6/21/94: 7:30-10:00PM
Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
Wed 1/19/94, 2/16/94; Thurs 2/24/94 & 6/2/94: 6:00-10:00PM
Expiration date: 05/27/94

Computer Professionals for Social Responsibility - Nick Pasquariello
POB 42791, San Francisco, CA 94142; TEL. 431-2990
7/13/94: 7-9 PM
Expiration date: 07/14/94

Friends of the Urban Forest - Kathleen Zierolf
501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494
6/23/94: 7 PM
Expiration date: 06/24/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/26/94

Page 3

Park Branch

Haight Ashbury Neighborhood Council - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
2nd Thursdays: 7:00PM
Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse
409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757
3rd Thursdays: 1:00PM
Expiration date: 07/22/94

Haight Ashbury Street Fair - Pablo Heising
952 Ashbury St, San Francisco, CA 94117; TEL. 661-8025
Thurs 3/31, Tues 4/26 & 5/31/94: 7:00-7:45PM
Expiration date: 06/01/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7-9 PM
Expiration date: 11/08/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/13, 6/20 & 6/27: 7-10 PM
Expiration date: 06/28/94

Sri Chinmoy Meditation Group - Bitapi Solomon
2028 Taraval St #5, San Francisco, CA 94116; TEL. D 621-1994/E 681-3564
Tues 5/3 & 5/10; Thurs 5/19 & 5/26/94: 7:30-9 PM
Expiration date: 05/27/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/26/94

Page 4

Potrero Branch

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

San Francisco Independent Booster Club - Richard Millet
250 Connecticut St #5, San Francisco, CA 94107; TEL. 861-0345
1st Saturdays each month: 11 AM - 12:45 PM
Expiration date: 12/04/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

05/26/94

Page 5

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi
1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553
2nd & 4th Thursdays monthly: 1-3 PM
Expiration date: 11/10/94

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays monthly, starting April '94: 1-2:30 PM
Expiration date: 12/20/94

MAY 17 1994

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

SFPL-15

(5/92)

Application Date: 5/14/94**NOTE:** Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|------------------------------------------------------------|-----------------------------------|
| Dates Requested: <u>2nd and 4th Thurs. each month</u> | Time Requested: <u>1-3 PM</u> |
| Facility: <u>Western Addition Branch</u> | Attendance Expected: <u>15</u> |
| Describe event or purpose of meeting: <u>I See Bebe</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>AMERICAN CHRONIC PAIN ASSOC.</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>TO DISCUSS OUR FEELINGS RE OUR PAIN</u> | |
| Primary Contact Person Applying: <u>TERI RAIHONDI</u> | Position in Group: <u>GROUP LEADER</u> |
| Full Mailing Address: <u>1845 FRANKLIN ST, APT. 305 S.F. CA. 94109</u> | |
| Day Phone: <u>(415) 771-6553</u> | Evening Phone: _____ |
| Secondary Contact Person: <u>Janet Ranche</u> | Position in Group: _____ |
| Full Mailing Address: <u>1925 Grant Ave SF CA 94133</u> | |
| Day Phone: <u>415 391 1353</u> | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐, No ☒. If yes, attach insurance rider.

I certify I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

_____ (signature)

FOR DEPARTMENT USE ONLY
 EXPIRATION DATE: Dec Nov. 10, 1994

DOCUMENTS DEPT.

MAY 13 1994

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ initials of authorizing authority

| | |
|------------------------------------------|------------------------|
| FEEES PAID/WAIVED: Room rental: \$ _____ | rec'd/waived by: _____ |
| Key Deposit: \$ _____ | rec'd/waived by: _____ |
| Janitorial: \$ _____ | rec'd/waived by: _____ |

 SAN FRANCISCO
PUBLIC LIBRARY

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

 BY: BRANCH/MAIN MANAGER: Jean Jackson

ACPA Group Meeting Dates

10-14-93

10-28

11-4

11-18

12-2

12-16

12-30 not at library

1994 2nd & 4th Thurs.

1-13-94

1-27

2-10

2-24

3-10

~~3-24~~

4-14

4-28

5-12

5-26

6-9-94

6-23

7-14

7-28

8-11

8-25

9-8

9-22

10-13

10-27

11-10

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

FEB 15 1994
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Dates Requested: May 26, 1994 | Time Requested: 6:00 p.m. to 10:00 p.m. |
| Facility: Park Branch Community Room | Attendance Expected: 40 - 60 people |
| Describe event or purpose of meeting: Discussion of community issues, usually with guest speakers. | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------|
| Name of Group: Cole Valley Improvement Association | | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Discussions of community issues | | |
| Primary Contact Person: Karen Cronmie | | Position in Group: President |
| Full Mailing Address: 628 Ashbury St., S.F. 94117 | | |
| Day Phone: (415) 431-1414 | Evening Phone: (415) 431-1414 | |
| Secondary Contact Person: Doerte Murray | | Position in Group: Treasurer |
| Full Mailing Address: 526 Clayton St., S.F., 94117 | | |
| Day Phone: 626-3607 | Evening Phone: 626-3607 | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Cole Valley Improvement Assn. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Cole Valley Imp. Assn. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Cole Valley Imp. Assn. (group or organization), its agents or employee.

Cole Valley Imp. Assn. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Karen Lynne Cronmie (signature) Feb 10, 1994 (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available; Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruth S. Vose

DOCUMENTS DEPT.
 FEB 16 1994
 SAN FRANCISCO
 PUBLIC LIBRARY

EXCELSIOR BRANCH
SAN FRANCISCO PUBLIC LIBRARY

MAY 03 1994

REQUEST FOR USE OF PUBLIC MEETING ROOMS

(PLEASE PRINT OR TYPE) FINANCIAL FITNESS CENTER, AFFILIATE OF
NAME OF ORGANIZATION: FINANCIAL FREEDOM FOUNDATION, NON-PROFIT
501 (C)(3) ORGANIZATION
PURPOSE OF ORGANIZATION: TO EDUCATE GRASSROOTS OF SOCIETY
ON THE IMPORTANCE OF BECOMING DEBT-FREE
TYPE OF ACTIVITIES taking place in the Library: FREE SEMINAR

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: AURORA MOYRONG / RODNEY CAREY
ADDRESS: 2720 SAN JOSE AVE, SAN FRANCISCO
TELEPHONE: (415) 334-1302
OFFICIAL CAPACITY: DIRECTOR - FINANCIAL FITNESS CENTER

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: AURORA MOYRONG Telephone: (415) 334-1302
NAME: RODNEY CAREY Telephone: (510) 530-7995

SPACE REQUESTED: ANY MEETING ROOM AREA
DATE(S): JUNE 1, 1994 Hours: 6:00 to 8:00
APPROXIMATE ATTENDANCE: 30-40 people ?

OTHER INFORMATION: WE WILL BE ADVERTISING IN THE
NEWSPAPERS

This form is to be completed and returned to:

Chief of the Main Library
San Francisco Public Library
Civic Center
San Francisco, CA 94102
558-3471

OR

In case of Branch Library,
return to the Librarian in
charge of the Branch where
space is requested.

For further information on
Branch meeting facilities call:

558-3602 DOCUMENTS DEPT.

MAY 9 1994

SAN FRANCISCO
PUBLIC LIBRARY

SATISFACTION GUARANTEED

"I went from being near suicidal with all the calls and threats from bill collectors and the I.R.S. to now, where just one year later I am well over half way from being debt free. If I can do it anybody can."

J. Mattem / Phoenix Az.

"In my practice, I help people from all walks of life. The Financial Fitness program gives each individual the opportunity to understand and develop workable long-term plans to solve financial problems."

P. Thome, CPA / Somerset, N.J.

"Financial Fitness satisfies the need for financial independence through education and personalized service."

P. Spiekys, Financial Services / Rockford, Ill.

"Just 6 weeks in the program and for the first time we were able to pay for Christmas without charging one thing. We are now saving for a down payment for our first home."

A. Belli / Reno, Nv.

"I tried another service for over a year but ended up getting nowhere. After the same time at the Financial Fitness Centers I have paid off all my credit cards and now see the light at the end of the tunnel. Thanks Financial Fitness."

M. Renshaw / Salt Lake City, Ut.

Warning: Those who do not rid themselves of financial bondage now, will never know freedom.

"THOSE WHO UNDERSTAND INTEREST
EARN IT, THOSE WHO DON'T PAY IT"

Carol A. Walker

"WEALTH IS TRANSFERRED FROM THE
IGNORANT TO THE WELL INFORMED."

Scott L. Moyes

"WHEN PERFORMANCE IS MEASURED
PERFORMANCE IMPROVES, WHEN
PERFORMANCE IS MEASURED
REPORTED BACK THE RATE OF
IMPROVEMENT ACCELERATES."

Thomas S. Monson

DON'T BE A STATISTIC...

CALL TODAY!

- Initial Consultation Free -

San Francisco (415) 334-1302
East Bay (510) 530-7995

Affiliated with the Financial Freedom Foundation, Inc.,
a 501 (C)(3) public non-profit organization.



Financial Fitness

C E N T E R S

Putting People
On the Road to
Financial Freedom

ARE YOU LIVING...

DEBT

FREE?

OR...

ARE YOU LIVING IN... ECONOMIC BONDAGE?

According to the U.S. Department of Labor, the average American wage-earner is over \$15,000 in debt, not including their car or mortgage, *credit cards* being the major recipient of that debt.

According to the Department of Health and Human Services, in 1988, out of every 100 people who were 65 or older:

- 13 still work full-time
- 23 still work part-time
- 64 were retired

Of the 64 who were retired, 61 had incomes of less than \$5,000 per year. These people, no doubt, all wanted to achieve **FINANCIAL FREEDOM**. Then what is the answer that only 3 people out of 100 seem to have?

1. **LITTLE OR NO DEBT**
2. **A WORKABLE SPENDING PLAN**
3. **KNOWLEDGE OF HOW MONEY REALLY WORKS**
4. **A DEFINITE FINANCIAL BLUEPRINT FOR SUCCESS.**

WHO WE ARE

Financial Freedom Enterprises, Inc. has developed the total Financial Fitness Center. The services and products offered by our nationwide *Financial Fitness Centers* make up a well rounded program to help all individuals and families discover the freedom and security of living debt free!

WE CAN HELP!

Each *Financial Fitness Center* offers three comprehensive programs to fit every individual's and family's needs.

FINANCIAL FITNESS TRAINING PROGRAM:

This program is for those who have no problem servicing their debt but find themselves in financial inertia, living paycheck to paycheck and unable to get ahead.

Our services provide:

1. A Financial Blueprint for Success to eliminate all personal debt in approximately one-third the normal time period.
2. Help in tracking individual spending.
3. Weekly workshops and accountability sessions with professionally trained counselors.
4. Personalized counseling to maximize suggested methods in attaining personal financial goals.

DEBT RETIREMENT PROGRAM:

This program is for those who are inundated with bills and creditors and do not have sufficient cash flow to service their debt. This program, for honorably discharging all debts, is a positive alternative to bankruptcy.

We can assist each individual in:

1. Negotiating reduced payments with creditors.
2. Disbursing monthly payments to creditors through our licensed, bonded client trust account.
3. Establishing a workable household budget.
4. Education through weekly workshops on how to more effectively control spending.

QUALITY OF LIFE ADVANTAGES
For the busy professional who would like to utilize our payment disbursement services, thus freeing their time for more productive endeavors.

Our professionally trained staff provide the following:

1. An established customized budget tailored to individual needs.
2. Weekly disbursements of payment obligations through our licensed, bonded client trust account.
3. Monthly spreadsheet accounting by dollar amount and percentage.
4. Personalized quarterly counseling to maximize suggested methods in attaining personal financial goals.

FINANCIAL FITNESS ADVANTAGES

1. Increase your disposable income by 10-20% without any increase.
2. Gain control of your personal financial future.
3. Put an end to "Paycheck to Paycheck" living.
4. Solve all your immediate and pressing financial crises.
5. Relieve stress and worry associated with financial problems.
6. Learn specific techniques to pay off all your debt, including your cars and home mortgage in approximately one-third the normal time period.

renewal
Application

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 05 1994

(Adopted 9/15/92)

Expiration Date: 11/8/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------------------------------|-------------------------------|
| Dates Requested: <u>First Monday of the Month</u> | Time Requested: <u>7-9 pm</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>6</u> |
| Describe event or purpose of meeting: <u>Support Group for Adults with Learning Disabilities</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Group: <u>SAN FRANCISCO SUPPORT GROUP FOR ADULTS WITH DYSLLEXIA</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>SUPPORT GROUP MEETING</u> | |
| Primary Contact Person: <u>BILL REED</u> | Position in Group: <u>FOUNDER</u> |
| Full Mailing Address: <u>1390 MARKET #1408 SF CA 94102</u> | |
| Day Phone: <u>415 905 1491 (DO NOT GIVE OUT)</u> | Evening Phone: <u>415 626 4116</u> |
| Secondary Contact Person: <u>DAVE ROACH</u> | Position in Group: <u>CO-FOUNDER</u> |
| Full Mailing Address: <u>768 6th AVE. SF CA 94118</u> | |
| Day Phone: | Evening Phone: <u>666-0844</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

S.F.S.G.F.A.W.D. (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the S.F.S.G.F.A.W.D. (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on S.F.S.G.F.A.W.D. (group or organization), its agents or employee.

S.F.S.G.F.A.W.D. (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

William Reed (signature) 5-2-94 (date)

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------|
| SPECIAL AUTHORIZATION: | | DOCUMENTS DEPT. <u>MAY 9 1994</u> SAN FRANCISCO PUBLIC LIBRARY |
| REFRESHMENTS: _____ (initials of authorizing authority). | | |
| FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____ | | |
| Key Deposit: \$ _____ rec'd/waived by: _____ | | |
| Janitorial: \$ _____ rec'd/waived by: _____ | | |
| <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Room Not Available: Alternate Suggested: _____ | | |
| BY: BRANCH/MAIN MANAGER: <u>Ruth S. Wise</u> | | |

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 27 1994
 (Adopted 9/15/92)

Expiration Date: 12/4/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------------------------|------------------------------------------|
| Date Requested: <u>1st SAT. EA. MO.</u> | Time Requested: <u>11:00am - 12:45pm</u> |
| Facility: <u>POTREIRO HILL LIBRARY</u> <u>MTR ROOM, 1616 20TH ST</u> | Attendance Expected: <u>6-8 PERSONS</u> |
| Describe event or purpose of meeting: <u>NEIGHBORHOOD COORDINATING ACTIVITIES: OPEN MTR</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>SAN FRANCISCO INDEPENDENT</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>BOOSTER CLUB</u> <u>NEIGHBORHOOD COORDINATING ACTIVITIES: OPEN MTR</u> | |
| Primary Contact Person: <u>RICHARD MILLET</u> | Position in Group: <u>SECRETARY</u> |
| Full Mailing Address: <u>250 CONNECTICUT ST #5</u> <u>SF 94107</u> | |
| Day Phone: <u>861-0345</u> | Evening Phone: <u>861-0345</u> |
| Secondary Contact Person: <u>JAN FRATE</u> | Position in Group: <u>EXECUTIVE DIRECTOR</u> |
| Full Mailing Address: <u>1201 EVANS ST</u> <u>SAN FRANCISCO, CA 94124</u> | |
| Day Phone: <u>826-1100</u> | Evening Phone: <u>822-2777</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☐. If yes, attach insurance rider.

_____ (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the _____ (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on _____ (group or organization), its agents or employee.

_____ (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

 (signature) (date).

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: _____

DOCUMENTS DEPT.

MAY 27 1994

SAN FRANCISCO
 PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

DOCUMENTS DEPT.

JUN 6 1994

SAN FRANCISCO
PUBLIC LIBRARY

Page 1

06/03/94

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - Commodore User Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
Wed 1/12, 2/9, 3/9, 4/13, 5/11 & 6/8/94: 6:30-8:45PM
Expiration date: 06/09/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Neighborhood of the Excelsior McLaren Task Force - Jo Coffey
248 Dublin, San Francisco, CA 94112; TEL. 585-6505
6/15/94: 6:30-8:45 PM
Expiration date: 06/16/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/03/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

Park Branch

"Sonn KaRa" Performance Art Salon - Ron Leeson

224 Hugo St, San Francisco, CA 94122; TEL. 566-4631

6/16, 6/30, 7/7 & 7/21/94: 7-10 PM

Expiration date: 07/01/94

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

10/27/94: 6-10 PM

Expiration date: 10/28/94

Computer Professionals for Social Responsibility - Nick Pasquariello

POB 42791, San Francisco, CA 94142; TEL. 431-2990

7/13/94: 7-9 PM

Expiration date: 07/14/94

Friends of the Urban Forest - Kathleen Zierolf

501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494

6/23/94: 7 PM

Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/03/94

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Park Branch

Haight Street Merchants - Bill Hoover
1400 Haight St, San Francisco, CA 94117; TEL. D 255-1180/E 648-3174
6/15/94: 7 PM
Expiration date: 06/16/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Bicycle Coalition (SFBC) - David Snyder
1949 Page St, San Francisco, CA 94117; TEL. 863-1701/252-9119/668
2nd Mondays each month, starting July '94: 6-10 PM
Expiration date: 01/01/95

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. D 905-1491/E 626-41
1st Mondays: 7-9 PM
Expiration date: 11/08/94

Word for Word - Jeri Cohen
938 Howard, San Francisco, CA 94103; TEL. 864-1237
6/8/94: 3-6 PM
Expiration date: 06/09/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/03/94

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Potrero Branch

Potrero Women's Club - Margaret Rice

528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423

2nd Wednesdays: 1:00PM

Expiration date: 10/06/94

San Francisco Independent Booster Club - Richard Millet

250 Connecticut St #5, San Francisco, CA 94107; TEL. 861-0345

1st Saturdays each month: 11 AM - 12:45 PM

Expiration date: 12/04/94

Sri Chinmoy Center - Charlie Rebich

529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626

6/6, 6/9 & 6/11/94: 4-6 PM

Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-

862 Polsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251

2nd Wednesdays beg. 4/13/94: 6:30-8:00PM

Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues

566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471

Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM

Expiration date: 11/04/94

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi

1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553

2nd & 4th Thursdays monthly: 1-3 PM

Expiration date: 11/10/94

National Council of Negro Women - Willie Kennedy

City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734

3rd Saturdays: 2:00-5:00PM

Expiration date: 12/28/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/03/94

Page 5

Western Addition Branch

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays monthly, starting April '94: 1-2:30 PM
Expiration date: 12/20/94

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

Expiration Date: 6/10/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|--------------------------------------------------------------------------|--------------------------|
| Date Requested: June 6 and June 9 | Time Requested: 4 - 6 pm |
| Facility: PARK | Attendance Expected: 60 |
| Describe event or purpose of meeting: Introductory Meditation Seminar | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: Sri Chinmoy Center | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: Meditation group offering classes as a community service | |
| Primary Contact Person: Charlie Rebach | Position in Group: Coordinator |
| Full Mailing Address: 529 Moraga St. | |
| Day Phone: 552-2443 | Evening Phone: 665-8626 |
| Secondary Contact Person: Golapendu Ng | Position in Group: Co-coordinator |
| Full Mailing Address: 529 Moraga St. | |
| Day Phone: 552-2443 | Evening Phone: 665-8626 |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

Sri Chinmoy Center (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Sri Chinmoy Center (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmoy Center (group or organization), its agents or employee.

Sri Chinmoy Center (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

[Signature] (signature) 2/14/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☒ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Ruby S. Voss

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JUN 1 1994
 SFPL-15
 (6/19/92)

Application Date: 5-31

NOTE: Complete this form in duplicate and submit with organization literature to Manager of Requested Facility.

| | |
|------------------------------------------------------------|------------------------------|
| Date Requested: <u>6/8/94</u> | Time Requested: <u>3-6</u> |
| Address: <u>1833 Page Ntg Room</u> | Attendees Expected: <u>6</u> |
| State the event or purpose of meeting: <u>Rehearsal</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Word for Word</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Rehearsal</u> | |
| Primary Contact Person: <u>John Lynn Colvin</u> | Position in Group: <u>Quarter Member/Producer</u> |
| Full Mailing Address: <u>438 Howard SF. 94103 / 151 Central Ave 94117</u> | |
| Day Phone: <u>864.1237</u> | Evening Phone: <u>same</u> |
| Secondary Contact Person: <u>Sue Harbel</u> | Position in Group: <u>Artistic Director</u> |
| Full Mailing Address: <u>same</u> | |
| Day Phone: <u>647.7757</u> | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐ , No ☒ . If yes, attach insurance rider.

I certify that I have read the meeting room rules and Waiver of Liability and agree to all provision of the above:

John Lynn Colvin (signature)

FOR DEPARTMENT USE ONLY

EXPIRATION DATE: June 9, 1994

SPECIAL AUTHORIZATION:

FRESHMENTS: _____ Initials of authorizing authority _____

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____

Key Deposit: \$ _____ rec'd/waived by: _____

Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Peter S. Dose

JUN 10 1994

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

SAN FRANCISCO
PUBLIC LIBRARY

06/10/94

Page 1

Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

Excelsior Branch

CWest - SF Commodore & Amiga Users Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
1st Wed in 7/94; 2nd Wed 8/94 - 12/94: 6:30-8:45PM
Expiration date: 12/15/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94

International Training in Communication - David Gore
875 - 25th Ave, San Francisco, CA 94121; TEL. H 752-6190/W 255-3719
Sat 5/14 & 6/11/94: 12:00-4:00PM
Expiration date: 06/12/94

Neighborhood of the Excelsior McLaren Task Force - Jo Coffey
248 Dublin, San Francisco, CA 94112; TEL. 585-6505
6/15/94: 6:30-8:45 PM
Expiration date: 06/16/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/10/94

Page 2

Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

Park Branch

"Sonn KaRa" Performance Art Salon - Ron Leeson

224 Hugo St, San Francisco, CA 94122; TEL. 566-4631

6/16, 6/30, 7/7 & 7/21/94: 7-10 PM

Expiration date: 07/01/94

Citizens for Health - Jennifer Lively

1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733

Tues 5/17 & 6/21/94: 7:30-10:00PM

Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

10/27/94: 6-10 PM

Expiration date: 10/28/94

Computer Professionals for Social Responsibility - Nick Pasquariello

POB 42791, San Francisco, CA 94142; TEL. 431-2990

7/13/94: 7-9 PM

Expiration date: 07/14/94

Friends of the Urban Forest - Kathleen Zierolf

501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494

6/23/94: 7 PM

Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/10/94

Page 3

Park Branch

Haight Street Merchants - Bill Hoover
1400 Haight St, San Francisco, CA 94117; TEL. D 255-1180/E 648-3174
6/15/94: 7 PM
Expiration date: 06/16/94

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Bicycle Coalition (SFBC) - David Snyder
1949 Page St, San Francisco, CA 94117; TEL. 863-1701/252-9119/668
2nd Mondays each month, starting July '94: 6-10 PM
Expiration date: 01/01/95

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. 626-4116
1st Mondays & Tues 7/5/94: 7-9 PM
Expiration date: 11/08/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/10/94

Page 4

Potrero Branch

San Francisco Independent Booster Club - Richard Millet
250 Connecticut St #5, San Francisco, CA 94107; TEL. 861-0345
1st Saturdays each month: 11 AM - 12:45 PM
Expiration date: 12/04/94

Sri Chinmoy Center - Charlie Rebich
529 Moraga St, San Francisco, CA 94122; TEL. D 552-2443/E 665-8626
6/6, 6/9 & 6/11/94: 4-6 PM
Expiration date: 06/12/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi
1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553
2nd & 4th Thursdays monthly: 1-3 PM
Expiration date: 11/10/94

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/10/94

Page 5

Western Addition Branch

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays monthly, starting April '94: 1-2:30 PM
Expiration date: 12/20/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

APR 21 1994

(Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------------------|----------------------------------------|
| Dates Requested: <u>6/11</u> | Time Requested: <u>4:00pm - 6:00pm</u> |
| Facility: <u>POTRERO</u> | Attendance Expected: <u>20-30</u> |
| Describe event or purpose of meeting: <u>Free Public Meditation Class</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Sri Chinmay Center</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Free classes offered for the community</u> | |
| Primary Contact Person: <u>Charlie Rebich</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>529 Moraga St. S.F. CA 94122</u> | |
| Day Phone: <u>(415) 697-5040</u> | Evening Phone: <u>(415) 665-8626</u> |
| Secondary Contact Person: <u>Golapendu Ng</u> | Position in Group: _____ |
| Full Mailing Address: <u>Same</u> | |
| Day Phone: <u>(415) 552-2443</u> | Evening Phone: <u>same</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Sri Chinmay Center (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the Sri Chinmay Center (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmay Center (group or organization), its agents or employee.

Sri Chinmay Center (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

[Signature] (signature) 4/20/94 (date)

SPECIAL AUTHORIZATION:

REFRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

☐ Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: [Signature]

DOCUMENTS DEPT.

APR 26 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

(Adopted 9/15/92)

(4-1-94)

Expiration Date: 6/28/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|------------------------------------------------------------------|-----------------------------------|
| Dates Requested: <u>6/13, 6/20, 6/27</u> | Time Requested: <u>7-10pm</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>50-60</u> |
| Describe event or purpose of meeting: <u>Meditation Class</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Sri Chinmoy Centre</u> | Non-Profit: Yes <input checked="" type="radio"/> No <input type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Offer free meditation instruction to the public</u> | |
| Primary Contact Person: <u>Charlie Rebich</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>529 Maraga St. S.F., CA 94122</u> | |
| Day Phone: <u>552-2443</u> | Evening Phone: <u>665-8626</u> |
| Secondary Contact Person: <u>Golapendu Ng</u> | Position in Group: |
| Full Mailing Address: <u>Same</u> | |
| Day Phone: <u>Same</u> | Evening Phone: <u>Same</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Sri Chinmoy Centre (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of Sri Chinmoy Centre (group or organization) activities including, but not limited to use of the City's facilities equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Sri Chinmoy Centre (group or organization), its agents or employee.

Sri Chinmoy Centre (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

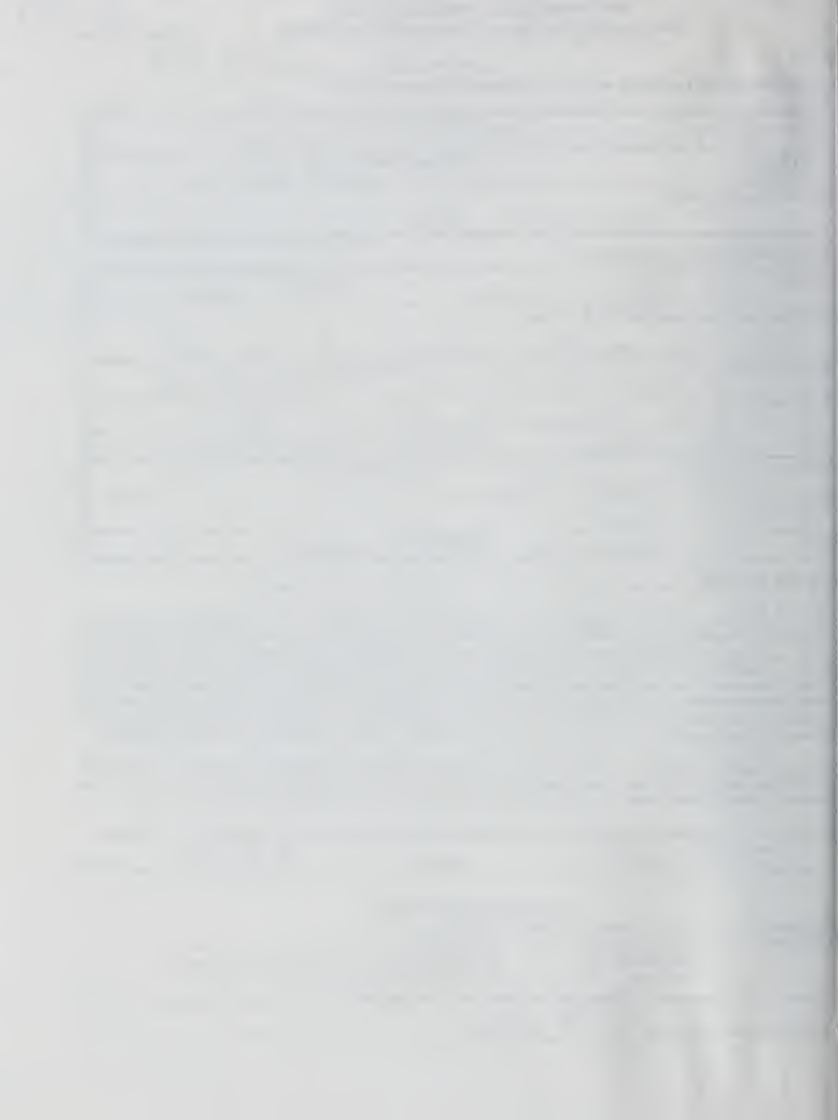
[Signature] (signature) 4/1/94 (date)

SPECIAL AUTHORIZATION:

FRESHMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Pete Vose



JUN 10 1994

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR SHORT-TERM USE OF LIBRARY MEETING ROOM
(Please type or print)

LOCATION OF MEETING ROOM: Bernal Heights Library
 DATE(S): 6/14/94; 7/12/94 HOURS: 5:00 to 6:00 pm
 NAME OF ORGANIZATION: Family Support Sucs of Bay Area
 PURPOSE OF ORGANIZATION: Social Work; Non-profit; Family
Preservation and Respite Care
 TYPE OF ACTIVITIES planned for library space: Info meeting for
Child care position
 ESTIMATED ATTENDANCE: 25

INDIVIDUAL IN CHARGE of meeting(s) in library space:

NAME: Briana MooreOFFICIAL CAPACITY: Trainer / Recruiter CoordinatorTELEPHONE NO.: 510 261-2294ADDRESS: 3264 Sheppard Ave
Oakland, CA 94602

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Judy Levin, Prog Dir TELEPHONE NO.: 510 261-2282NAME: Don Fox, Ex Dir TELEPHONE NO.: 510 261-2282

OTHER INFORMATION: _____

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: Briana MooreOFFICIAL CAPACITY: Recruitment CoordTELEPHONE NO.: 510 261-2294

ADDRESS: _____

DOCUMENTS DEPT.

JUN 15 1994

SAN FRANCISCO
PUBLIC LIBRARYTODAY'S DATE: 6/9/94

(510) 261-2294
main office: (510) 261-2282
fax: (510) 261-0388

BRIANA S. MOORE
Social Worker



FAMILY SUPPORT SERVICES
of the Bay Area
3245 Sheffield Avenue
Oakland, CA 94602

... providing respite & family preservation services to Bay Area families

Family Support Services of the Bay Area



■
RESPIRE CARE AND INTENSIVE
HOME-BASED SERVICES FOR
BAY AREA FAMILIES

WHO ARE WE?

*F*amily Support Services of the Bay Area is a private, non-profit charitable organization that provides support to parents and other caregivers of vulnerable children — those who are disabled, medically fragile, drug exposed, abused or neglected, and those at risk of abuse or neglect.

Our goal is to help caregivers nurture their children and keep their families intact.

FAMILY SUPPORT SERVICES OF THE BAY AREA OFFERS THE FOLLOWING SERVICES:

■ RESPIRE CARE

Provides respite to parents and other caregivers in Alameda, Contra Costa, San Mateo and San Francisco counties.

■ SAN FRANCISCO FAMILY PRESERVATION PROGRAM

Provides intensive home-based services to San Francisco families whose children are at imminent risk of removal from their homes.

"Parenting is a 24-hour a day job, seven days a week, with no vacations or coffee breaks. Thanks to the help I received from Family Support Services, I feel able to be a more loving parent."

WHO ARE THE SERVICE PROVIDERS?


Respite providers and family preservation staff are carefully selected and thoroughly trained to meet the special and varying needs of the families and children in each program. They are highly dedicated individuals who offer a rich diversity of skills and experience. Our staff members reflect the racial, ethnic and linguistic backgrounds of the families served.



3245 SHEFFIELD AVENUE
OAKLAND, CALIFORNIA 94602
(510) 261-2282

1305 STEVENSON STREET
SAN FRANCISCO, CALIFORNIA 94103
(415) 861-4060

FAMILY SUPPORT SERVICES OF THE BAY AREA receives primary support from federal, state and county funds. The Agency is also supported by private individuals, donors and Foundations. Donations are tax deductible.

 Printed in U.S.A. on Recycled Paper

RESPIRE CARE

RESPIRE CARE gives parents and other caregivers a much needed break from the daily demands of caring for their special needs children. Parents use respite to enjoy an evening out, a weekend away, or to spend time with other family members. Caregivers also use respite services to keep important appointments or during times of crisis.

Children benefit from respite because it gives them opportunities to explore new environments, make new friends and have a trusting experience with another caring adult. Respite care is available to these and other caregivers, according to the eligibility criteria of each county:

- parents of children with developmental disabilities
- parents whose children have been abused, neglected, or abandoned, or those at risk of abuse
- emergency and specialized long-term foster parents
- relative caregivers (grandparents and other family members)

TWO TYPES OF CARE ARE AVAILABLE:

IN-HOME RESPIRE

Providers are available 24 hours a day, seven days a week to care for children in the child's home.

OUT-OF-HOME RESPIRE

Children receive care in the home of a certified Family Support Services provider who lives in the family's community.

"Lamar is at an age where he really notices strangers. Our respite provider instantly won his confidence. It was so comforting to know he was in such capable hands."



THE FAMILY PRESERVATION PROGRAM

THE FAMILY PRESERVATION PROGRAM offers a broad range of supportive services to families who are referred by the San Francisco Department of Social Services. Staff members tailor services to the needs of each family.

In-home social workers assist families who are facing crises caused by: substance abuse, physical, emotional/sexual abuse, chronic neglect, mental health problems, lack of basic resources or serious illness.



Staff visit a diversity of families in their homes to help improve their parenting and household skills by:

- demonstrating age-appropriate child discipline and activities
- modeling infant and child care
- teaching household and money management
- assisting with meal planning and preparation
- providing health and safety information
- providing supportive counseling and crisis intervention
- linking families with community resources
- advocating for family and individual rights in housing, school, healthcare and the legal system
- providing transportation to medical and other appointments when appropriate

"The people who came to my house showed me new ways to take care of my children. Now I feel like I can make a better home for them."

A MESSAGE FROM THE DIRECTOR

Despite the destructive forces facing them, families remain society's single most important resource for raising and nurturing children and youth. Today's families are severely challenged on a daily basis; many barely manage, and some do not survive. Family breakup could often be prevented through the provision of relevant and timely services.

For the first time, federal legislation has been passed that supports families, both philosophically and financially. Sponsored by Representative Robert Matsui (D. - California), and supported by a coalition of children's advocates, The Family Preservation Act was recently passed by Congress and signed by President Clinton. This new entitlement program earmarks one billion in additional funds for the nation's child welfare and foster care system. California is expected to receive \$100 million over the next five years. Family preservation services envisioned in the bill include intensive home

continued on Page 4

FAMILY PRESERVATION AT WORK

FAMILY SUPPORT SERVICES OF THE BAY AREA

Winter 1994

Volume 2

"There is a West African proverb which states, *"The trouble for the thief is not how to steal the chief's bugle, but where to blow it."* Our organizations can take a child from a non-supportive nuclear family, but to what end? Wouldn't we show our intelligence and concerns more effectively, if rather than removing the child, we worked together with the entire family in order to create a healthy unit?"

- Maya Angelou

The Family Preservation Program celebrated its second anniversary in November 1993. The program's mission is to prevent, postpone or reduce out-of-home placement of San Francisco children who are at imminent risk of removal due to abuse and/or neglect, by improving family function. All families are referred from the San Francisco Department of Social Services (SFDSS). The 10 social workers and 2 clinical supervisors work intensively with a family, at home, for a period of approximately 6 months, teaching clients how to become more effective parents. Using social service and interpersonal counseling skills, social workers address child abuse/neglect, substance abuse, emotional and mental illness, and offer families solid solutions to problems. Social workers connect families with substance abuse treatment programs, childcare facilities, AFDC, Food Stamps & SSI, community mental health agencies, education and job training programs, and basic resources.

The Family Preservation Program (FPP) has assisted dozens of families in preventing the removal of children over the past two years. These families have not only been able to have SFDSS dismiss their cases from the

Child Welfare System but have made lasting, positive changes within themselves.

Jeneene M.K. is a changed person from a year-and-a-half ago. Her two children, LaNeesha, 12 and Lateesha, 4, were placed into Emergency Shelter Care in Sonoma County due to Jeneene's neglect of them. Jeneene, at that time, was addicted to crack cocaine and heroin.

When Jeneene was using drugs, she often left her children home alone, starting when the youngest was just two-years-old. A familiar routine for Jeneene was a morning stop at her methadone maintenance program and then a retreat to a crack house where she stayed sometimes until two in the morning. She left the girls at home watching television with little to eat, and with strict instructions to stay away from the windows.

"I thought I was caring for my kids and myself, but I wasn't because of the drugs," Jeneene says of those days.

Eventually Jeneene came to the attention of the San Francisco Department of Social Services. She was required to enter into a

Continued on page 4



RESPITE PROVIDER RECOGNITION PICNIC A CHANCE TO SAY THANK YOU!



On a warm, toasty day at Roberts Regional Park was the perfect setting for the respite provider recognition picnic on September 12, 1993. Over 100 people attended the recognition picnic. Providers, kids and staff alike enjoyed themselves. An incredible BBQ, a heated game of volleyball, a vicious tug of war, a hilarious balloon toss, and a wobbly three legged race all contributed to the fun and frolic of the day.

Since respite providers are constantly on the move and constantly giving to others, it is a real pleasure and honor to be able to recognize these incredible people! Respite providers were given glow-in-the-dark FSSBA key rings, to assist them on those late respite nights. A raffle drawing for

great door prizes for the respite providers and prizes for respite providers' children were special parts of the picnic which allowed us to recognize our providers and their families.

A special thanks to LaWana Johnson, Intake Social Worker, and Kristi Callesen, interim secretary, who spent countless hours soliciting the needed items. Special thanks also to Brenda Puckett, our Personnel Representative, who cooked outrageously wonderful barbecue over a hot grill all day. All the staff were instrumental in making the event happen.

Many thanks to the following generous donors. Without the generosity of these individuals and companies, the respite provider recognition picnic would not have been possible.



Alhambra Water Company • American Poultry Company • Atlanta West Barbecue • Bay Area Beverage Company • The Bread Workshop • John Callesen • Clorox Company • Club Sport • Dreyer's Grand Ice Cream • El Torito • Everett and Jones Barbecue • Flint's Barbecue • Geyser Natural Beverage Company • Grandma's Bed and Breakfast • Granny Goose Foods, Inc. • Home Fine Sausage • Kilpatrick's Bakeries • Kimball's East • Kincaid's Steakery • Leaven and Earth • Long's Drugs • Lucky Stores-Fruitvale • McDonald's Restaurant • Morehouse Foods • Mother's Cake and Cookie Company • Nabisco Brands, Inc. • Oakland A's • Oakland Paper and Supply Company • Odwalla Natural Juices • Otis Spunkmeyer • Peet's Coffee & Tea • The Punchline Comedy Club • Raleigh's Cafe • Schwarz Fine Sausage • See's Candies • San Francisco Giants • Snapple Beverage • Studio Hair • Togo's Eatery-Berkeley • Ultra Lucca Delicatessen • United Can Co. • Will's Family Favorites • Wilsey Foods



FUND-RAISER UPDATE: SECOND ANNUAL LIFESPAN EVENT

"...LIFESPAN sends all of the money raised by the runner (walker) to the charity of her or his choice and my choice is of course Family Support Services of the Bay Area. As a respite provider for this organization I am a daily witness to the impact our services have on the families we serve. Our goal is to provide support to help parents and caregivers keep their families intact and nurture their children... These parents and caregivers practice real family values. Your sponsorship will help us to continue to support them."

A

s was reported in the premiere issue of this newsletter, fund-raising has become a major focus for our Board of Directors. This effort was deemed necessary in order to build and maintain unrestricted cash reserves for the agency.

It was therefore quite timely that Family Support Services (FSSBA) was invited to participate in LIFESPAN, a fund-raising, walk-a-thon style event for non-profit organizations. The Second Annual LIFESPAN event was held on Sunday, September 26, 1993. Participants in this fund-raiser assembled at the Bay Bridge toll plaza, then proceeded—either by walking or running—across the span. In all, the course was 6.2 miles (10 kilometers). It should come as no surprise that many FSSBA clients, respite providers, staff & board members and agency friends gave their support to this fun, yet profitable event.

And talk about support! We had at least two expectant moms and a participant who'd been barely able to walk only a month before the event. But each of our walking/running supporters made the entire course without being shuttled to the finish by A.C. Transit's "pooper scoopers". This is particularly impressive once you realize that the bridge is a steady uphill slope from its East Bay beginning all the

way to the Treasure Island tunnel. The sweeping bay views were spectacular, making it easy to forget you were on an upward climb.

Among the most ardent of supporters were FSSBA Board President, Robin Tucker and full-time respite provider, Barbara Cook. Remarkably, between just these two, over one thousand dollars in pledges were received!

Barbara's supporters were not only from the Bay Area, but from other parts of the country as well. She was able to garner such rousing support due to her evocative outreach correspondence. In part it read:

"...LIFESPAN sends all of the money raised by the runner (walker) to the charity of her or his choice and my choice is of course Family Support Services of the Bay Area. As a respite provider for this organization I am a daily witness to the impact our services have on the families we serve. Our goal is to provide support to help parents and caregivers keep their families intact and nurture their children... These parents and caregivers practice real family values. Your sponsorship will help us to support them."

In all, it was a wonderful day for a wonderful cause. We extend an appreciative THANK YOU to all who contributed in any way toward making this effort such a success!

-Teri Malone



Some of FSSBA's runners/walkers pose (& rest) after the race.





Family Preservation/Continued from front cover

substance abuse treatment program immediately and to contact the Family Preservation Program for services.

Jeneene admits she was skeptical about FPP in the beginning. She did not want to become too involved with any social service agency, but she was willing to try the services in order to maintain custody of LaTeasha and reunify with LaNeesha, who had been placed into relative foster care with Jeneene's mother.

When Jeneene first began working with FPP she did not show up for half of the scheduled home visits. She says that she conveniently forgot about the visits or she found herself running late that particular day. What hooked Jeneene into the program was the approach of the FPP social worker. *"I never got the feeling that she was uppity like some social workers. She suggested things in a way that I could hear them. She didn't try to force me to do things, but pointed out to me the reasons why I needed to do certain things. She gave me a choice."*

Jeneene worked with her FPP social worker and her SFDSS social worker in achieving and maintaining recovery, improving her nurturing relationship with her children, providing adequate medical care for her children, and participating in family therapy.

Jeneene found the consistent weekly visits with the FPP social worker the most helpful in her task of keeping and maintaining custody of her children. *"The weekly visits kept me motivated and gave me a time limit to accomplish goals."* The FPP social worker met with Jeneene often at her substance abuse treatment program and also attended her graduation. *"I was happy she came to my drug treatment program. I could show her how good I was doing,"* Jeneene says.

"Now I see myself loving myself and my girls. I got saved in the church. My kids feel safe now. I won't let them stay at home by themselves. They trust me more."

Claudius F. is a 52-year-old father of two 7-year-old twin boys. The boys were removed from the custody of their natural mother due to her substance abuse and neglect of

them and placed into foster care. Mr. F. wanted desperately to get custody of the boys but had little experience in caring for toddlers. He accepted the services of the Family Preservation Program in order to improve his parenting skills and fulfilled reunification requirements from SFDSS.

Claudius says of his FPP social worker, *"She really put me on my feet. She searched energetically for resources, such as AFDC, Food Stamps, and WIC. She drove me around to places. She never forced me to do anything. She didn't assume that I knew absolutely nothing at all. She asked first or offered a suggestion then helped me to follow up on it. She showed respect for my family."*

Jeneene and Claudius represent a continuum of the families who receive FPP services. But the strength, spirit, and openness that allowed Jeneene and Claudius to accept our interventions is the common thread which courses through each and every family FPP touches.

-Cynthia Green

Director's Message/Continued from Cover

based crisis intervention, parenting skills training, temporary respite care for caregivers of special needs children, and information and referral services.

Although previous federal legislation philosophically mandated family preservation efforts since 1980, funds were never allocated for services. Family preservation pilot projects funded by foundations and by states focused on demonstrating immediate cost savings by limiting eligibility to families with children about to be, or already placed out of the home. An additional constraint was the duration of services being limited to 4-6 weeks. As a result, services came to families too late and too briefly for them to make the significant and lasting changes necessary to effect the long term cost savings of keeping the family together. Hopefully this new social policy will not be short-sighted in allocating resources and developing regulations.

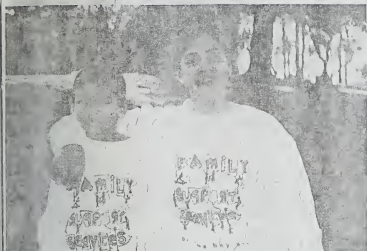
It is exciting that in California, there have been many different family preservation demonstration projects throughout the state for almost twenty years. The current leadership of the State Department of Social Services has emphasized family preservation services, and locally, San Francisco, Alameda, Contra Costa and other Bay Area counties already have various family preservation services in place.

FSSB's two programs, respite care and family preservation services, are representative of the types of services that support, strengthen and preserve families. I am proud of the unfailing dedication of our staff who provide these services. I thank them for their tireless efforts and for oftentimes going that extra mile on behalf of the families.

I also want to thank all of the numerous community based agencies and organizations that have assisted us in our efforts. Special thanks goes to the Bank of America employees, who, for the second consecutive year, demonstrated incredible generosity in giving many beautiful and bountiful holiday gifts and food baskets to 65 families! Also, many thanks to the Nellcor Corporation employees for their many years of generous holiday gifts and food that have been given to special needs children. It is the contributions and interest of corporations and individuals which sustain the agency and assist us in our efforts to continue providing supportive services to families. I hope, in this New Year, we can look forward to continued and expanded support.

-Lou Fox, Executive Director





Board president, Robin Tucker, and son, Rashad, model the FSSBA T-shirts.

FSSBA T-SHIRTS STILL AVAILABLE

FSSBA's T-Shirts have been a big hit! T-Shirt wearers have received lots of compliments on the white T-Shirts with fuschia, blue, yellow and black drawing. We still have a selection of long sleeve and short sleeve T-Shirts available in pre-shrunk 100% cotton (except for child's large which are not pre-shrunk). We will be making a second order of the T-Shirts so if you need a certain size, we will be sure to have it available. T-Shirts come in adult sizes (S, M, L, XL, and XXL) and child Sizes (S, M and L).

If you haven't ordered one and would like to do so, feel free to contact Teri Malone at our Oakland Office, (510) 261-2282 or Kerma Torres at our San Francisco, (415) 861-4060. THANK YOU!

NEW FEDERAL FUNDS COME TO FSSBA FOR RESPITE SERVICES

FSSBA is delighted to report that we were awarded a three year federal grant which will enable us to provide respite to two new groups of caregivers. For the first time, FSSBA will be able to offer respite services to parents who have adopted children with special needs (older children, children of color, sibling groups, drug exposed children...) through the Black Adoption Placement and Resource Center and through Family Builders Oakland. The new federal grant will also allow us to extend respite services to caregivers of children with HIV who are being followed at Children's Hospital-Oakland. These new groups were targeted for funding due to the lack of availability of services to these special groups of caregivers. FSSBA had received numerous requests for service from these caregivers and their social workers advocating for the need for respite services. We are delighted to be able to offer respite services to these new groups of caregivers.

We are also equally delighted that the federal grant will allow us to continue providing respite services to San Mateo and Alameda County Emergency Foster Parents and San Francisco grandparents and other family members caring for medically fragile, drug exposed, abused and neglected children.

The new grant will begin January, 1994. The Family Welfare Research Group at University of California at Berkeley will be evaluating the benefits of respite for caregivers as well as assessing service delivery issues during this grant period. This will be an important endeavor as there is very little information and research concerning respite services.

It is exciting to be on the cutting edge of extending respite services to new groups of caregivers. As caregivers take on extra challenges of parenting a child with special needs, respite will be there.

Could You?

With lips

That do not seal as you see

With lips

That do not speak as you speak

I come into your world

Your world (looks like)

Turns me inside

Can't hide it

Flipped

Around you

Dislessless

And outmaneuvered

Learn into your world

Learn into your world

And learn your ways

For a first

Could you

Come into my world?

—Teri Malone

Update

United Way Donor
Option Really Helps

The United Way Donations Campaign has come to a close. Many corporations and businesses were solicited by United Way on a behalf of non-profit agencies in the Bay Area. Family Support Services of the Bay Area is eligible to receive donations through United Way via the Donor Option method of contribution. In this manner, Family Support Services can be earmarked as the recipient of any United Way donations.

Many thanks to Annette Guinn who invited us to speak at her place of business, EquiFax. Annette distributed a personal note which she had written on behalf of her daughter, Shelly. I was very moved by her note and wanted to share it with all of you.

"Hello, My name is Shelly G. I am 13 years old and weigh 25 pounds. Some of you know me and my mom. She works in the UMH department. The official name of my condition is Cytomegalovirus

Disease. Basics like speech, caring for myself or independence are things I will never have. But my mom is great! She never makes me feel bad or less than the loving child I am (or try to be at least). Sometimes I think about my mom though. It must be a strain to never have any time to herself, to always be worrying about me. That's why we both really appreciate Family Support Services. They give mom time away to do things less obligated families take for granted. She can go shopping, run errands, or just have fun. Besides, truth be known, it gets her out of my hair for awhile. You can designate gifts to Family Support Services through your United Way giving, and we hope you will. Please, be part of the our solution, give to the United Way. Thank you."

Thank you Annette and Shelly. Many thanks to all of you who remembered Family Support Services through United Way. These donations do make a difference!

FAMILY SUPPORT SERVICES OF THE BAY AREA

(FSSBA) is a non-profit, private, social service agency that provides support to parents and other caregivers of vulnerable children. Our mission is to help caregivers nurture their children and keep their families intact.

3245 Sheffield Avenue
Oakland, CA 94602
(510) 261-2282

1315 Stevenson Street
San Francisco, CA 94103
(415) 861-4060

President
Robin Tucker

Vice President
Janet Robinson Bryan

Secretary/Treasurer
Terry Bayer

Executive Director
Lyn Fay

Printing: Printing generously donated
by Diamond Printer, Oakland

FAMILY SUPPORT SERVICES OF THE BAY AREA (FSSBA)

3245 Sheffield Avenue
Oakland, CA 94602
(510) 261-2282

MAY 09 1994

SAN FRANCISCO PUBLIC LIBRARY EXCELSIOR BRANCH

10/70

Request for Use of Public Meeting Rooms

(PLEASE PRINT OR TYPE)

NAME OF ORGANIZATION: NEIGHBORS OF THE EXCELSIOR (NOR) McLARENPURPOSE OF ORGANIZATION: NEIGHBORHOOD GROUP TASK FORCETYPE OF ACTIVITIES taking place in the Library: MEETING TO DISCUSSWAYS TO INCREASE USE OF McLAREN PARK

INDIVIDUAL IN CHARGE of meetings in Library:

NAME: JC GEEFFADDRESS: 248 DUBLIN SAN FRANCISCO 94112TELEPHONE: 585-6506OFFICIAL CAPACITY: NOTE BOARD MEMBER

NAME TWO responsible members of the group who could be contacted by the Library by telephone during office hours, if necessary:

NAME: JC GEEFFTelephone: 974-2461/585-6506NAME: MARION AIRDTelephone: 355-6624SPACE REQUESTED: EXCELSIOR LIBRARY MEETING ROOMDATE(S): JUNE 15Hours: 6:30 PM to 8:15 PMAPPROXIMATE ATTENDANCE: 20 PEOPLE

OTHER INFORMATION:

This form is to be completed and returned to:

Chief of the Main Library
 San Francisco Public Library
 Civic Center
 San Francisco, CA 94102
 558-3471

OR

In case of Branch Library,
 return to the Librarian in
 charge of the branch where
 space is requested.

For further information call:
 558-3602

MAY 10 1994

SAN FRANCISCO
 PUBLIC LIBRARY

6/16/94

| | |
|-----------------------------------------------------------------------------|-----------------------------|
| Date Requested: June 15, 1994 | Time Requested: 7:00 P.M. |
| Priority: PAK | Attendance Requested: 35-40 |
| Describe event or purpose of meeting: meeting of Haight Street merchants | |

| | |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Name of Group: <u>Daughters Street Merchants</u> | Non-Profit: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>talk about issues of concern to people down</u> | |
| Primary Contact Person: <u>Bill Hoover</u> | Position in Group: <u>President</u> |
| Full Mailing Address: <u>1400 Harvard St SE (Gallery of Jewels)</u> | |
| Day Phone: <u>255-1180</u> | Evening Phone: <u>648-3174</u> |
| Secondary Contact Person: <u>Judith Salmon</u> | Position in Group: <u>on board of director</u> |
| Full Mailing Address: <u>1408 Harvard St SE Ca 94117</u> | |
| Day Phone: <u>863-2837</u> | Evening Phone: <u>863-3148</u> |

Street Merchants (Identify group or organization) shall indemnify and save harmless the City from and shall pay and all loss, damage, injury, liability, and claims thereof for injury to or death of a person, including employees of the City, arising out of the (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect as of the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on (group or organization), its agents or employees.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Judith Gilman (signature) 5/2/94 (date)

PRESTIMENTS: _____ (initials of authorizing authority).
 FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

Approved ☒ Disapproved ☐ Room Not Available: Alternate Suggested: _____

Y. BRANCH/MAIN MANAGER: Reid S. Voss

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 25 1994

(Adopted 9/15/92)

Expiration Date: July 1, '94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Dates Requested: <u>6/16 and 6/30</u> | Time Requested: <u>7-10 P.M.</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>25</u> |
| Describe event or purpose of meeting: <u>Performance Art Salon: four different performers showing their works in progress</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>Sonn Kafa "Performance Art Salon"</u> | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>An opportunity for performers to show their works in progress.</u> | |
| Primary Contact Person: <u>Don Leeson</u> | Position in Group: <u>Producer/Coordinator</u> |
| Full Mailing Address: <u>224 Hugo St. S.F. CA 94122</u> | |
| Day Phone: <u>(415) 566-4631</u> | Evening Phone: <u>(415) 566-4631</u> |
| Secondary Contact Person: <u>Kelly Kahn</u> | Position in Group: <u>Coordinator</u> |
| Full Mailing Address: <u>928 Ninth Ave. SF. CA 94122</u> | |
| Day Phone: <u>(415) 564-7631</u> | Evening Phone: <u>(415) 564-7631</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

"Sonn Kafa "Performance Art Salon" (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the City, (group or organization) activities including, but not limited to use of the City's facilities and equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on "Sonn Kafa" (group or organization), its agents or employee.

"Sonn Kafa" (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Don Leeson (signature) 5-24/94 (date)

SPECIAL AUTHORIZATION:
 FRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Ruth S. Voss

DOCUMENTS DEPT.

MAY 27 1994

SAN FRANCISCO
PUBLIC LIBRARY

SAN FRANCISCO PUBLIC LIBRARY

APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 25 1994
JUN 2 1994
(Adopted 9/15/92)

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

Expiration Date: July 1, '94

| | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Date Requested: 6/16 and 6/30 | Date Requested: 7-10 P.M. |
| Facility: PARK (7/7 and 7/21) | Attendance Expected: 25 |
| Describe event or purpose of meeting: Performance Art Salon: Four different performers showing their works in progress | |

INFORMATION ON REQUESTING ORGANIZATION

| | |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: SonnKatra "Performance Art Salon" | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: An opportunity for performers to show their works in progress. | |
| Primary Contact Person: Ron Leeson | Position in Group: Producer/Coordinator |
| Full Mailing Address: 224 Hugo St. S.F. CA 94122 | |
| Day Phone: (415) 566-4631 | Evening Phone: (415) 566-4631 |
| Secondary Contact Person: Kelly Kahn | Position in Group: Coordinator |
| Full Mailing Address: 928 North Ave. SF. CA 94122 | |
| Day Phone: (415) 564-7631 | Evening Phone: (415) 564-7631 |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

"SonnKatra" "Performance Art Salon" (Identify group or organization) shall indemnify and save harmless the City from and just any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of "SonnKatra" (group or organization) activities including, but not limited to use of the City's facilities equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some imposed by law or contract on "SonnKatra" (group or organization), its agents or employee.

"SonnKatra" (Identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim litigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:
Ron Leeson (signature) 5-24/94 (date)

SPECIAL AUTHORIZATION:
RESIDENTS: (initials of authorizing authority).

PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
Key Deposit: \$ _____ rec'd/waived by: _____
Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Rolf S. Wosia

"SONNkara"

Performance
Art Salon



Park
Branch
Library



1833 Page St.
San Francisco
(415)566-4631

8:00 PM, Thursdays

June 16th

Kally Kahn
David Hirata
Dave Rairden
Victoria Doggett
Ron Leeson

June 30th

Kally Kahn
David Hirata
Dave Rairden
Gaetanna
Ron Leeson

75
131
11/7/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/17/94

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Bayview Branch

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

Bay Area Summit Lighthouse Study Group - May Grace
1620 Mason #2, San Francisco, CA 94133; TEL. W 956-2000/H 421-4795
6/18/94: None stated
Expiration date: 06/19/94

Bi-lingual After School Task - Lillian McGill
3341 - 23rd St, San Francisco, CA 94110; TEL. 821-6035
Tues & Thurs or Wed & Fri, 9/7/93 - 6/17/94: 4:00-6:00PM
Expiration date: 06/18/94

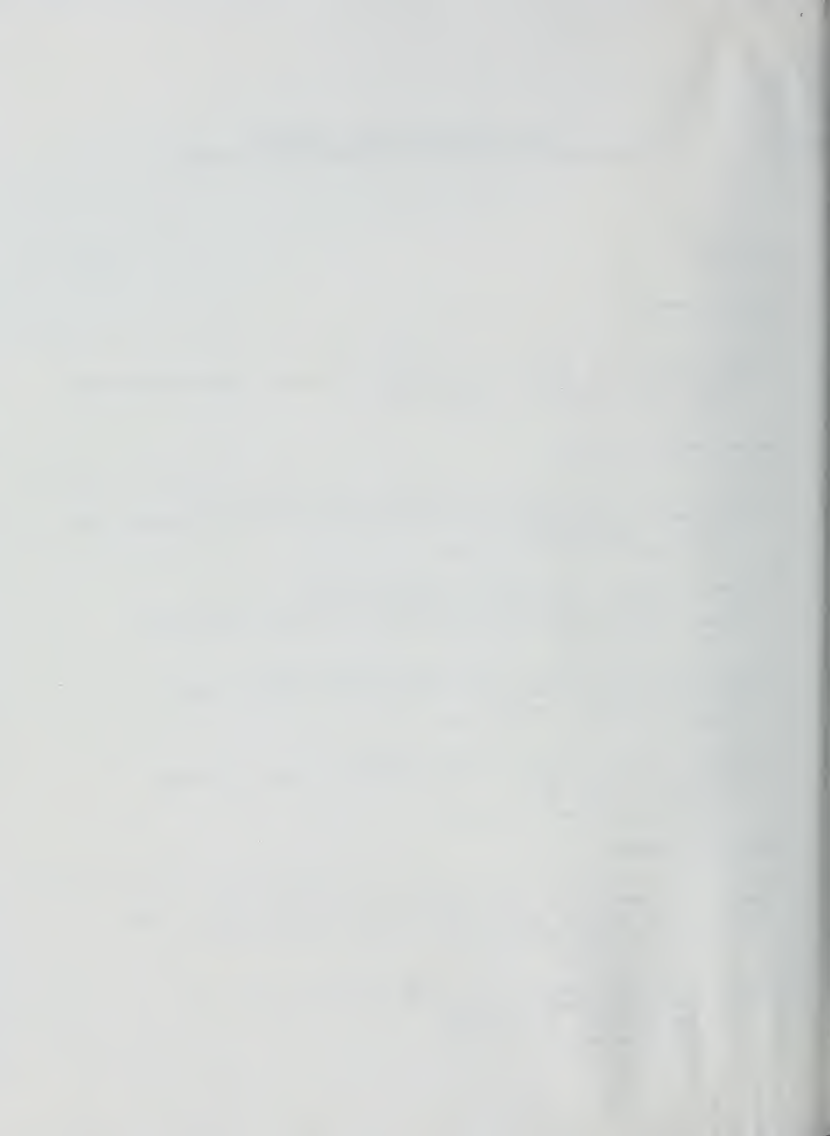
Family Support Services of Bay Area - Briana Moore
3264 Sheffield Ave, Oakland, CA 94602; TEL. 510-261-2294
6/14 & 7/12/94: 5-6 PM
Expiration date: 07/13/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
8/10/94: 7-8:30 PM
Expiration date: 08/11/94

Excelsior Branch

CWest - SF Commodore & Amiga Users Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
1st Wed in 7/94; 2nd Wed 8/94 - 12/94: 6:30-8:45PM
Expiration date: 12/15/94

Excelsior Business Assoc. LTD - Ming Y. Suen
4477 Mission St, San Francisco, CA 94112; TEL. 587-1231
4th Wednesdays: 6:30-8:30PM
Expiration date: 06/23/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/17/94

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Excelsior Branch

Neighborhood Safe Group - Pamela Matsuda
SAFE, , CA ; TEL. 564-SAFE
6/29, 7/16 & 8/3/94: 4:30-5:45 PM
Expiration date: 08/04/94

Noe Valley Branch

Playreading - Saul Fenster
520 Day St, San Francisco, CA 94131; TEL. 647-2483
Tues beginning 2/1/94: 2:00-4:00PM
Expiration date: 08/15/94

Park Branch

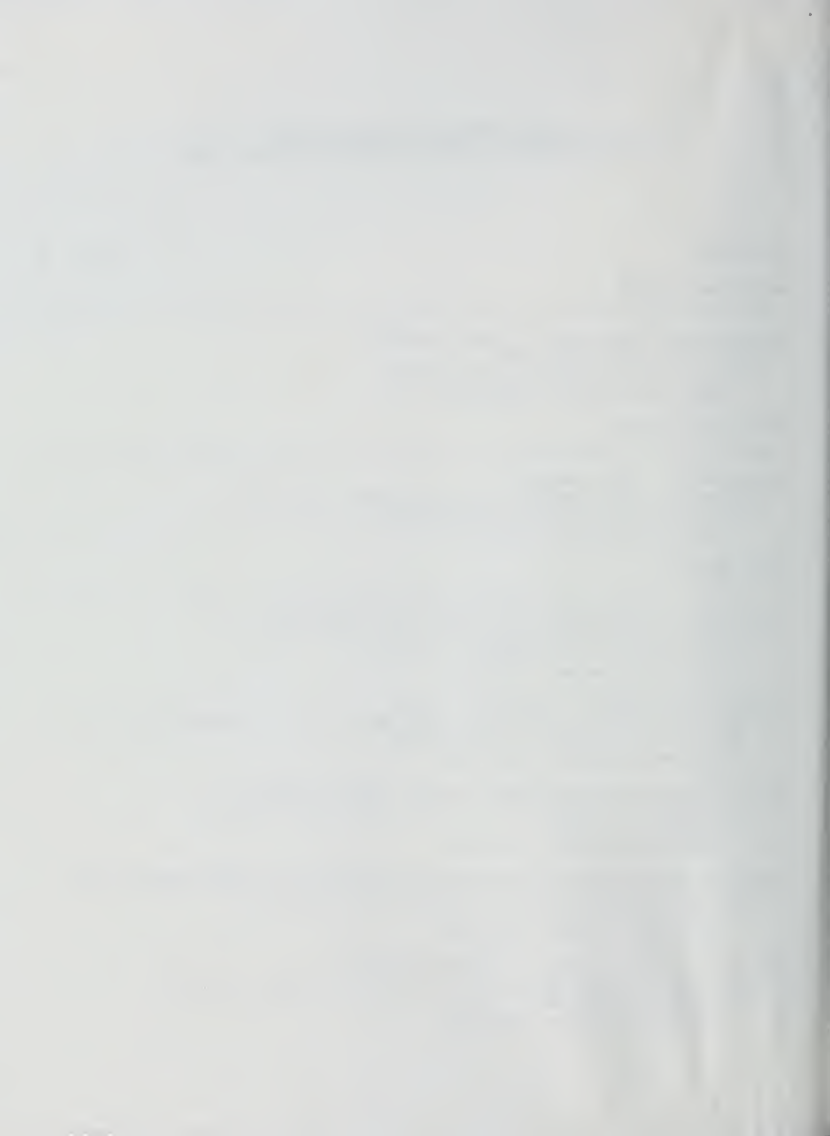
"Sonn KaRa" Performance Art Salon - Ron Leeson
224 Hugo St, San Francisco, CA 94122; TEL. 566-4631
6/16, 6/30, 7/7 & 7/21/94: 7-10 PM
Expiration date: 07/01/94

Citizens for Health - Jennifer Lively
1882 - 35th Ave, San Francisco, CA 94122; TEL. D 664-1464/E 566-9733
Tues 5/17 & 6/21/94: 7:30-10:00PM
Expiration date: 06/22/94

Cole Valley Improvement Association - Karen Crommie
628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414
10/27/94: 6-10 PM
Expiration date: 10/28/94

Computer Professionals for Social Responsibility - Nick Pasquariello
POB 42791, San Francisco, CA 94142; TEL. 431-2990
7/13/94: 7-9 PM
Expiration date: 07/14/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
7/28/94: 7-8:30 PM
Expiration date: 07/29/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/17/94

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Park Branch

Friends of the Urban Forest - Kathleen Zierolf

501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494

6/23/94: 7 PM

Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94

Park Police District Community Relations Mtg. - Michael Gannon

Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7

Thurs 5/5 & 8/4/94: 7:00-9:00PM

Expiration date: 08/05/94

SF Bicycle Coalition (SFBC) - David Snyder

1949 Page St, San Francisco, CA 94117; TEL. 863-1701/252-9119/668

2nd Mondays each month, starting July '94: 6-10 PM

Expiration date: 01/01/95

SF Support Group for Adults with Dyslexia - William Reed

1390 Market St #1408, San Francisco, CA 94102; TEL. 626-4116

1st Mondays & Tues 7/5/94: 7-9 PM

Expiration date: 11/08/94

Word for Word - Jerilynn Cohen

151 Central #3, San Francisco, CA 94117; TEL. 864-1237

6/28/94: 7:30-10:30 PM

Expiration date: 06/29/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn

1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924

1st Saturdays: 1:00-6:00PM

Expiration date: 09/30/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/17/94

Page 4

Potrero Branch

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

San Francisco Independent Booster Club - Richard Millet
250 Connecticut St #5, San Francisco, CA 94107; TEL. 861-0345
1st Saturdays each month: 11 AM - 12:45 PM
Expiration date: 12/04/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
862 Folsom St, San Francisco, CA 94107; TEL. D 974-5596/E 285-0251
2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi
1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553
2nd & 4th Thursdays monthly: 1-3 PM
Expiration date: 11/10/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/17/94

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Western Addition Branch

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays monthly, starting April '94: 1-2:30 PM
Expiration date: 12/20/94



APR 28 1994

SAN FRANCISCO PUBLIC LIBRARY

REQUEST FOR LONG-TERM USE OF LIBRARY MEETING ROOM

(Please type or print)

LOCATION OF MEETING: Bernal Heights

MONTHS: _____ through 6 month app?

DAY(S) OF THE WEEK/HOURS OF THE DAY: Saturday, June 18, 1994

NAME OF ORGANIZATION: Bay Area Summit Lighthouse Study Group

PURPOSE OF ORGANIZATION: We study ^{all} major philosophical & religious ideas

TYPE OF ACTIVITIES planned for library space: Seminars: Consciousness Raising

ESTIMATED ATTENDANCE: 25

INDIVIDUAL IN CHARGE of meetings in library space:

NAME: May Grace

OFFICIAL CAPACITY: Administrator, Lecturer

TELEPHONE NO.: (W) 956-2000 (H) 421-4795

ADDRESS: 1620 Mason #2, SF 94133

TWO ADDITIONAL MEMBERS OF THE ORGANIZATION whom the library can contact, if necessary:

NAME: Ana Maria Dean TELEPHONE NO.: 329-8764

NAME: Ann Terranova TELEPHONE NO.: 665-9753

OTHER INFORMATION: Is there any possibility we could see books needed for the workshop

DECLARATION OF RESPONSIBILITY: I agree to abide by all terms of the San Francisco Public Library Meeting Room Policy, and to be responsible for any cost or liability arising from our use of this facility.

NAME: May Grace

OFFICIAL CAPACITY: Organizer, Lecturer

TELEPHONE NO.: 421-4795 (H) 956-2000 (W)

ADDRESS: 1620 Mason #2, SF, CA 94133

TODAY'S DATE: 4/26/94

DOCUMENTS DEPT.

MAY 2 1994

SAN FRANCISCO
PUBLIC LIBRARY



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/23/94

DOCUMENTS DEPT.

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JUN 24 1994

Bayview Branch

SAN FRANCISCO
PUBLIC LIBRARY

Burnett Children's Center - Ana Fisher
1520 Oakdale Ave, San Francisco, CA 94124; TEL. D 585-0414/695-5660
Every other Thursday: 3:15-4:00PM
Expiration date: 09/30/94

Bernal Heights Branch

"SONnKara" Performance Salon - Ronald Leeson
224 Hugo St, San Francisco, CA 94122; TEL. 566-4631
7/13, 8/13 & 8/27/94: 6-9 PM
Expiration date: 08/28/94

Family Support Services of Bay Area - Briana Moore
3264 Sheffield Ave, Oakland, CA 94602; TEL. 510-261-2294
6/14 & 7/12/94: 5-6 PM
Expiration date: 07/13/94

Financial Fitness Center - Aurora Moyrong
2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302
8/10/94: 7-8:30 PM
Expiration date: 08/11/94

Excelsior Branch

CWest - SF Commodore & Amiga Users Group - George Todd
3462 - 17th St, Apt B, San Francisco, CA 94110; TEL. 626-9946
1st Wed in 7/94; 2nd Wed 8/94 - 12/94: 6:30-8:45PM
Expiration date: 12/15/94

Neighborhood Safe Group - Pamela Matsuda
SAFE, , CA ; TEL. 564-SAFE
6/29, 7/16 & 8/3/94: 4:30-5:45 PM
Expiration date: 08/04/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/23/94

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Noe Valley Branch

Playreading - Saul Fenster

520 Day St, San Francisco, CA 94131; TEL. 647-2483

Tues beginning 2/1/94: 2:00-4:00PM

Expiration date: 08/15/94

Park Branch

"SONNkara" Performance Art Salon - Ron Leeson

224 Hugo St, San Francisco, CA 94122; TEL. 566-4631

6/16, 6/30, 7/7 & 7/21/94: 7-10 PM

Expiration date: 07/01/94

Cole Valley Improvement Association - Karen Crommie

628 Ashbury St, San Francisco, CA 94117; TEL. 431-1414

10/27/94: 6-10 PM

Expiration date: 10/28/94

Computer Professionals for Social Responsibility - Nick Pasquariello

POB 42791, San Francisco, CA 94142; TEL. 431-2990

7/13/94: 7-9 PM

Expiration date: 07/14/94

Financial Fitness Center - Aurora Moyrong

2720 San Jose Ave, San Francisco, CA 94112; TEL. 334-1302

7/28/94: 7-8:30 PM

Expiration date: 07/29/94

Friends of the Urban Forest - Kathleen Zierolf

501 Broderick, San Francisco, CA 94117; TEL. D 330-1535/E 921-6494

6/23/94: 7 PM

Expiration date: 06/24/94

Haight Ashbury Neighborhood Council - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

2nd Thursdays: 7:00PM

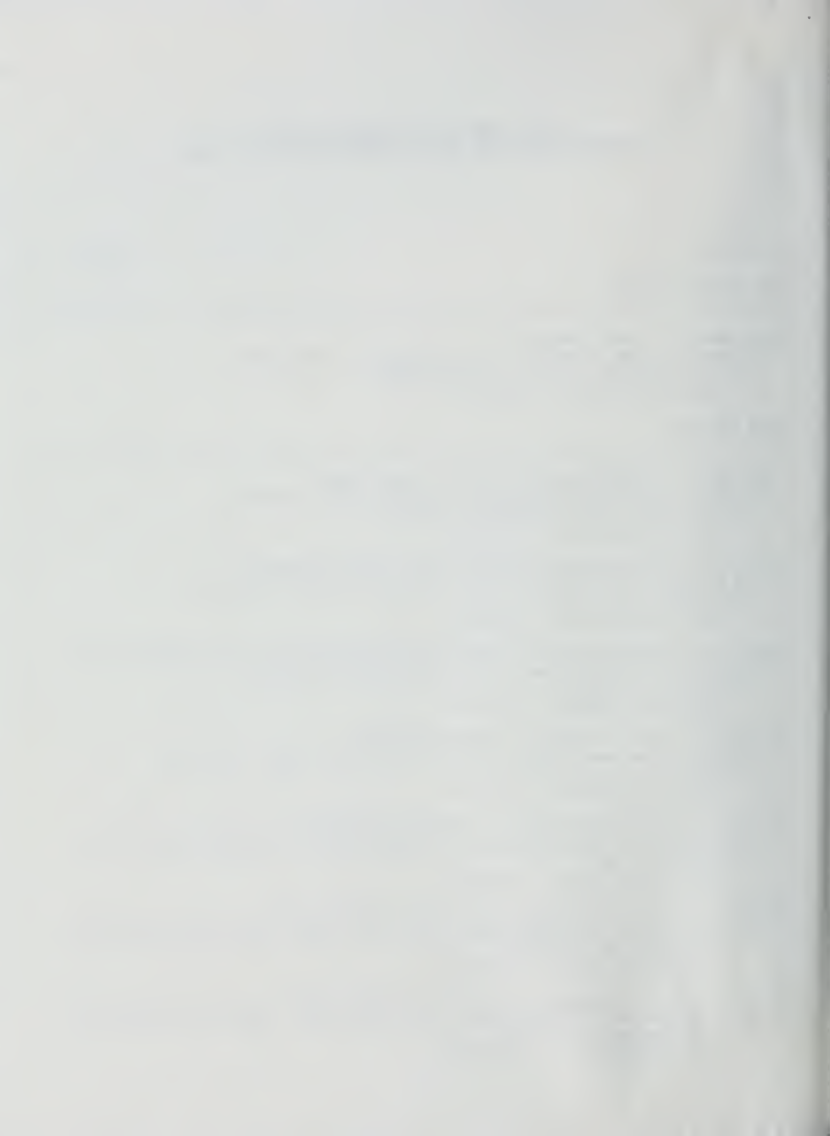
Expiration date: 07/15/94

Haight Ashbury Service Association - Donna Gouse

409 Clayton St, San Francisco, CA 94117; TEL. D 621-9553/E 564-8757

3rd Thursdays: 1:00PM

Expiration date: 07/22/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

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Park Branch

Park Police District Community Relations Mtg. - Michael Gannon
Park Police Stn, Stanyan/, San Francisco, CA 94117; TEL. D 553-1061/E 7
Thurs 5/5 & 8/4/94: 7:00-9:00PM
Expiration date: 08/05/94

SF Bicycle Coalition (SFBC) - David Snyder
1949 Page St, San Francisco, CA 94117; TEL. 863-1701/252-9119/668
2nd Mondays each month, starting July '94: 6-10 PM
Expiration date: 01/01/95

SF Support Group for Adults with Dyslexia - William Reed
1390 Market St #1408, San Francisco, CA 94102; TEL. 626-4116
1st Mondays & Tues 7/5/94: 7-9 PM
Expiration date: 11/08/94

William R. De Avila School Parent's Group - Paula Land
822 Masonic Ave, San Francisco, CA 94117; TEL. 563-1751
7/27/94: 6:30 PM
Expiration date: 07/28/94

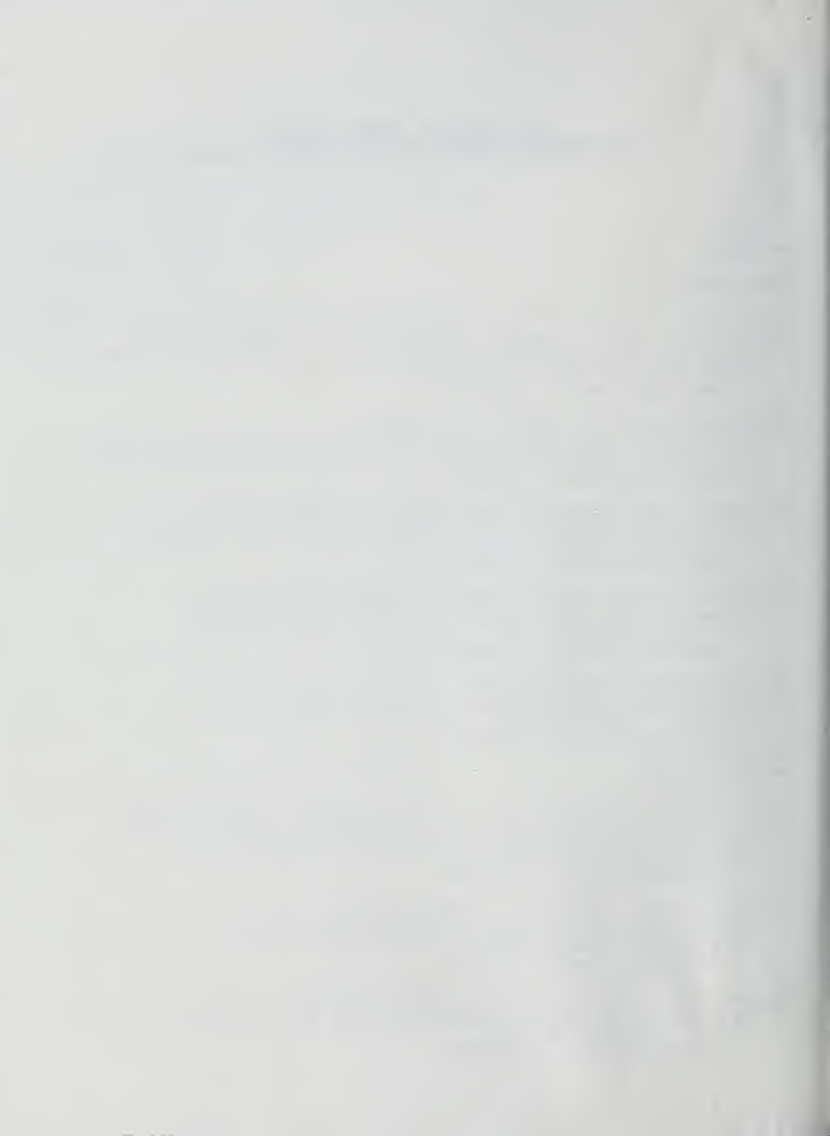
Word for Word - Jerilynn Cohen
151 Central #3, San Francisco, CA 94117; TEL. 864-1237
6/28/94: 7:30-10:30 PM
Expiration date: 06/29/94

Potrero Branch

Atari Bay Area Computer Users Society (ABACUS) - Roger Sinasohn
1034 Capitol Ave, San Francisco, CA 94112; TEL. 469-7924
1st Saturdays: 1:00-6:00PM
Expiration date: 09/30/94

National Health Federation - Shirley Potasz
1330 Schooner, Foster City, CA 94404; TEL. 341-0548
3rd Saturdays beg. 5/21/94: 1:30-5 PM
Expiration date: 11/20/94

Potrero Hill Archives Project - Peter Linenthal
298 Missouri St, San Francisco, CA 94107; TEL. 863-0784
Sat 7/9/94: 7-9:30 PM
Expiration date: 07/10/94



SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/23/94

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Potrero Branch

Potrero Women's Club - Margaret Rice
528 Arkansas St, San Francisco, CA 94107; TEL. 824-7423
2nd Wednesdays: 1:00PM
Expiration date: 10/06/94

San Francisco Independent Booster Club - Richard Millet
250 Connecticut St #5, San Francisco, CA 94107; TEL. 861-0345
1st Saturdays each month: 11 AM - 12:45 PM
Expiration date: 12/04/94

The Benefits Co. & SOMA Acupuncture/Natural Health - Michele/Carl Hangee-
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2nd Wednesdays beg. 4/13/94: 6:30-8:00PM
Expiration date: 10/12/94

Presidio/LFTB Branch

LFTB Advisory Committee - Elizabeth Heidhues
566 - 40th Ave, San Francisco, CA 94121; TEL. 752-0471
Thurs 5/5, 7/14, 9/1 & 11/3/94: 2:30PM
Expiration date: 11/04/94

Western Addition Branch

American Chronic Pain Assoc. - Jeri Raimondi
1845 Franklin St #305, San Francisco, CA 94109; TEL. 771-6553
2nd & 4th Thursdays monthly: 1-3 PM
Expiration date: 11/10/94

National Council of Negro Women - Willie Kennedy
City Hall, Room 235, San Francisco, CA 94102; TEL. 554-5734
3rd Saturdays: 2:00-5:00PM
Expiration date: 12/28/94

San Francisco Amateur Astronomers - Dennis Tye
2960 - 21st Ave, San Francisco, CA 94132; TEL. D 622-8993/E 566-0587
2nd Wednesdays: 7:00-8:45PM
Expiration date: 10/30/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATIONS FOR USE OF BRANCH MEETING ROOMS

06/23/94

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Western Addition Branch

San Francisco Esperanto Regional Organization - Charles Galvin, Jr.
121 Cortland Ave, San Francisco, CA 94110; TEL. D 397-5517/E 821-9783
Sat 5/7 & 6/4/94: 1:00-4:00PM
Expiration date: 06/28/94

The Senior Citizen Christian Fellowship Group - Mr. Dewitt Nunnery
111 Sweeney St, San Francisco, CA 94134; TEL. 468-2975
3rd Tuesdays monthly, starting April '94: 1-2:30 PM
Expiration date: 12/20/94

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

MAY 03 1994

(Adopted 9/15/92)

Expiration Date: June 24, 1994

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------------------------------------------|-----------------------------------|
| Dates Requested: <u>June 23</u> | Time Requested: <u>7 PM</u> |
| Facility: <u>PARK</u> | Attendance Expected: <u>20-30</u> |
| Describe event or purpose of meeting: <u>Friends of the Urban Forest tree planting mtg</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>FRIENDS of the Urban Forest</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Need a mtg site for non-profit comm. mtg</u> | |
| Primary Contact Person: <u>Kathleen Zierolf</u> | Position in Group: <u>Volunteer</u> |
| Full Mailing Address: <u>501 Broderick</u> | |
| Day Phone: <u>330-1535</u> | Evening Phone: <u>921-6494</u> |
| Secondary Contact Person: <u>Leah Greenblatt</u> | Position in Group: <u>FUF</u> |
| Full Mailing Address: <u>Friends of the Urban Forest 2nd Street</u> | |
| Day Phone: <u>543-5000</u> | Evening Phone: _____ |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

FUF (Identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of FUF (group or organization) activities including, but not limited to use of the City's facilities equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some act imposed by law or contract on FUF (group or organization), its agents or employee.

FUF (Identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

K Zierolf (signature) 5/4/94 (date)

SPECIAL AUTHORIZATION: (initials of authorizing authority).

REFRESHMENTS: _____
FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

DOCUMENTS DEPT.

MAY 9 1994

SAN FRANCISCO
PUBLIC LIBRARY

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Ruth S. Vase

| | | |
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| Field 1 | Field 2 | Field 3 |
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| Field 1 | Field 2 | Field 3 |
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SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JUN 17 1994
 (Adopted 9/15/92)

Expiration Date: 6/29/94

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|-----------------------------------------------------------|-----------------------------------|
| Date Requested: <u>Tues. June 28</u> | Time Requested: <u>7:30-10:30</u> |
| Facility: PARK | Attendance Expected: <u>10</u> |
| Describe event or purpose of meeting: <u>Rehearsal</u> | |

INFORMATION ON REQUESTING ORGANIZATION:

| | |
|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Name of Group: <u>Word for Word</u> | Non-Profit: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Theatre Company - Rehearsal</u> | |
| Primary Contact Person: <u>Jenilyn Cohen</u> | Position in Group: <u>Chairman</u> |
| Full Mailing Address: <u>151 Central # 3</u> | |
| Day Phone: _____ | Evening Phone: <u>864 1237</u> |
| Secondary Contact Person: <u>Susan Harloe</u> | Position in Group: <u>Artistic Director</u> |
| Full Mailing Address: <u>151 28th St. #3</u> <u>San Francisco 94131</u> | |
| Day Phone: <u>657 4272</u> | Evening Phone: <u>647 7537</u> |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒ If yes, attach insurance rider.

Word for Word (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of Word for Word (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect as or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on Word for Word (group or organization), its agents or employee.

Word for Word (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

I certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:
Susan Harloe (signature) June 16 1994 (date).

REFRESHMENTS: _____ (initials of authorizing authority).
 SPECIAL AUTHORIZATION:

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

Approved ☐ Disapproved ☐ Room Not Available: Alternate Suggested: _____

BRANCH/MAIN MANAGER: Red S. Vose

SAN FRANCISCO PUBLIC LIBRARY
APPLICATION FOR USE OF PUBLIC MEETING ROOMS

JUN 30 1994
 (Adopted 9/15/92)

Expiration Date: _____

NOTE: Complete this form in duplicate and submit to Manager of Requested Facility.

| | |
|---------------------------------------|-------------------------------------|
| Date Requested: <u>6/29</u> | Time Requested: <u>3:PM - 4 PM</u> |
| Facility: <u>BAYVIEW- WADEN #13</u> | Attendance Expected: <u>SIX (6)</u> |
| Describe event or purpose of meeting: | |

INFORMATION ON REQUESTING ORGANIZATION:

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Group: <u>CAHEED SUPPORT GROUP</u> | | Non-Profit: Yes <input type="radio"/> No <input checked="" type="radio"/> |
| Purpose of Group/Type of Activities to Take Place in the Library: <u>Conversation</u> <u>CAHEED - Calif. Assoc. for Health Education</u> | | |
| Primary Contact Person: <u>Verris Jackson</u> | Position in Group: <u>Leader Employment & Dignity</u> | |
| Full Mailing Address: <u>CAHEED 4938 Third St SF 94124</u> | | |
| Day Phone: <u>822-9144</u> | Evening Phone: _____ | |
| Secondary Contact Person: _____ | | Position in Group: _____ |
| Full Mailing Address: _____ | | |
| Day Phone: _____ | Evening Phone: _____ | |

CONDITIONS FOR USE: Insurance required? Yes ☐ No ☒. If yes, attach insurance rider.

CAHEED (identify group or organization) shall indemnify and save harmless the City from and against any and all loss, damage, injury, liability, and claim thereof for injury to or death of a person, including employees of the CAHEED (group or organization) activities including, but not limited to use of the City's facilities or equipment, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on, City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law in effect on or validly retroactive to the date of this agreement and except where such loss, damage, injury, liability or claim is the result of active negligence or willful misconduct of City and/or is not contributed to by any act of, or by any omission to perform some duty imposed by law or contract on CAHEED (group or organization), its agents or employee.

CAHEED (identify group or organization) shall indemnify and hold City harmless from all loss and liability, including attorney's fees, court costs, litigation expenses and all other liabilities incurred in and about any such claim investigation or defense thereof, which may be entered, incurred or assessed as a result of the foregoing.

certify I have read the meeting room rules, Waiver of Liability, and Conditions of Use and agree to all provisions of the above:

Verris Jackson

(signature)

6/29/94

(date)

SPECIAL AUTHORIZATION:

EFRESHMENTS: _____ (initials of authorizing authority).

FEES PAID/WAIVED: Room rental: \$ _____ rec'd/waived by: _____
 Key Deposit: \$ _____ rec'd/waived by: _____
 Janitorial: \$ _____ rec'd/waived by: _____

[] Approved [] Disapproved [] Room Not Available: Alternate Suggested: _____

BY: BRANCH/MAIN MANAGER: Catherine M. Bremer

